

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997  
AMOUNT DUE ON OR BEFORE 9/17/97: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N96000003089 (7)

1. Corporation Name

PUNTA GORDA VOLUNTEER FIRE ASSOCIATION, INC.

Principal Place of Business

1410 TAMiami TRAIL  
PUNTA GORDA FL 33950

Mailing Address

1410 TAMiami TRAIL  
PUNTA GORDA FL 33950

97 SEP 29 PM 1:16

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/10/1996

3a. Date of Last Report

2. Principal Place of Business

21 1410 Tamiami Trail

Suite, Apt. #, etc.

22

City & State

23 Punta Gorda FL

Zip

24 33950

Country

25 USA

2a. Mailing Address

26 1410 Tamiami Trail

Suite, Apt. #, etc.

27

City & State

28 Punta Gorda FL

Zip

29 33950

Country

30 USA

4. FEI Number

ETN

65-0748884

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☐ Yes

☒ No

g. Name and Address of Current Registered Agent

NOBLE, ROY J  
1410 TAMiami TRAIL  
PUNTA GORDA FL 33950

10. Name and Address of New Registered Agent

81 Name

Sanford, Kerry

82 Street Address (P.O. Box Number is Not Acceptable)

1410 Tamiami Trail

83

84 City

Punta Gorda

FL

85 Zip Code

33950

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9/10/97

12. OFFICERS AND DIRECTORS

TITLE ☒ DELETE

NAME NOBLE, ROY J  
STREET ADDRESS 515 TARPON WAY  
CITY-ST-ZIP PUNTA GORDA FL 33950

TITLE ☒ DELETE

NAME PALMER, JOHN E  
STREET ADDRESS 2800 CARMELLIA TERR.  
CITY-ST-ZIP PUNTA GORDA FL 33950

TITLE ☒ DELETE

NAME KAPUDJIA, CHARLES  
STREET ADDRESS 1250 TAYLOR RD., #321  
CITY-ST-ZIP PUNTA GORDA FL 33950

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME Sanford, Kerry  
1.3 STREET ADDRESS 21279 Davison Ave  
1.4 CITY-ST-ZIP Port Charlotte FL 33954

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME Wright, Jeff  
2.3 STREET ADDRESS 3342 Easy St  
2.4 CITY-ST-ZIP Port Charlotte FL 33950

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME Pietrzak, Gayle  
3.3 STREET ADDRESS 20610 Tappan Zee DR  
3.4 CITY-ST-ZIP Port Charlotte FL 33952

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS 400002309164--4  
4.4 CITY-ST-ZIP -10/01/97--01098--009

5.1 TITLE \*\*\*\*\*61.25 \*\*\*\*\*61.25

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE REQUIRED

CR2E037 (4/97)