

**2000 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jan 25, 2000 8:00 am**  
**Secretary of State**

01-25-2000 90083 019 \*\*\*\*70.00

**DOCUMENT # N97000001633**

1. Entity Name

**MUNSON VOLUNTEER FIRE AND RESCUE DISTRICT, INC.**

Principal Place of Business

Mailing Address

11688 MUNSON HIGHWAY  
 MILTON FL 32570

11688 MUNSON HIGHWAY  
 MILTON FL 32570-9324

C0010932



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2950243

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

**\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

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

City

**FL**

Zip Code

KING, JOHN M  
 701 ALABAMA STREET  
 MILTON FL 32570

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE

*John M King*

John M King

1-5-2000

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:**  
**SEE IS \$61.25**

9. Election Campaign Financing Trust Fund Contribution.

**\$5.00** May Be Added to Fees

**Make Check Payable to Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME  Delete  
 KING, JOHN M  
 STREET ADDRESS 701 ALABAMA ST  
 CITY-ST-ZIP MILTON FL 32570

TITLE NAME  Delete  
 GRICE, JAMES E  
 STREET ADDRESS 9980 TOMMY GRICE FIRELINE  
 CITY-ST-ZIP MILTON FL 32570

TITLE NAME  Delete  
 ROWELL, GLADYS  
 STREET ADDRESS 10290 MORRIS-ROWELL ROAD  
 CITY-ST-ZIP MILTON FL 32570

TITLE NAME  Delete  
 ROBEY, MARIANNE  
 STREET ADDRESS 3177 GEORGE CABANISS RD  
 CITY-ST-ZIP MILTON FL 32570

TITLE NAME  Delete  
 HARDY, CURTIS  
 STREET ADDRESS ROUTE 1, BOX 44  
 CITY-ST-ZIP MILTON FL 32570

TITLE NAME  Delete  
 GOMEZ, DERIK  
 STREET ADDRESS 10400 VALLEY GROVE RD  
 CITY-ST-ZIP MILTON FL 32570

TITLE NAME  Change  Delete  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE NAME  Change  Delete  
 CHRISTIE, CLYDE LAWRENCE JR.  
 STREET ADDRESS 10414 Valley Grove Rd  
 CITY-ST-ZIP Milton FL 32570

TITLE NAME  Change  Delete  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE NAME  Change  Delete  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE NAME  Change  Delete  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE NAME  Change  Delete  
 STREET ADDRESS  
 CITY-ST-ZIP

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*John M King*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-5-2000

Date

Daytime Phone #

850-623-5044