

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 29, 2002 8:00 am
Secretary of State

04-29-2002 90170 002 ****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

80077899



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

KING, JOHN M
701 ALABAMA STREET
MILTON FL 32570

Name

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

City

FL

Zip Code

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, President

4-12-02

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE 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	STREET ADDRESS	CITY-ST-ZIP		TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	
	P	<input type="checkbox"/> Delete	KING, JOHN M						<input type="checkbox"/> Change <input type="checkbox"/> Addition
	701 ALABAMA ST		MILTON FL 32570						
	V	<input type="checkbox"/> Delete	LAWRENCE, CHRISTIE C JR						<input type="checkbox"/> Change <input type="checkbox"/> Addition
	10414 VALLEY GROVE RD		MILTON FL 32570						
	S	<input type="checkbox"/> Delete	ROWELL, GLADYS						<input type="checkbox"/> Change <input type="checkbox"/> Addition
	10290 MORRIS-ROWELL ROAD		MILTON FL 32570						
	D	<input type="checkbox"/> Delete	ROBEY, MARIANNE						<input type="checkbox"/> Change <input type="checkbox"/> Addition
	3177 GEORGE CABANISS RD		MILTON FL 32570						
	D	<input type="checkbox"/> Delete	HARDY, CURTIS						<input type="checkbox"/> Change <input type="checkbox"/> Addition
	ROUTE 1, BOX 44		MILTON FL 32570						
	T	<input type="checkbox"/> Delete	MORRIS, BARBARA						<input type="checkbox"/> Change <input type="checkbox"/> Addition
	10390 VALLEY GROVE ROAD		MILTON FL 32570						

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, John M King, Pres

4-12-02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)