


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 10, 2004 8:00 am
Secretary of State

05-10-2004 90482 049 ****70.00

DOCUMENT # N97000001633					
1. Entity Name MUNSON VOLUNTEER FIRE AND RESCUE DISTRICT, INC.					
Principal Place of Business 11688 MUNSON HIGHWAY MILTON, FL 32570			Mailing Address 11688 MUNSON HIGHWAY MILTON, FL 32570		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country	Zip		Country
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 Alton M. Nixon - President	
				Street Address (P.O. Box Number is Not Acceptable)	
				Steep Head Road	
City Milton				FL	Zip Code 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE: <i>Barbara Morris</i>				DATE: 5-1-04	
Signature, typed or printed name of registered agent and title if applicable.				(NOTE: Registered Agent signature required when reinstating)	
Filing Fee is \$61.25 Due by September 8, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	P	<input checked="" type="checkbox"/> Delete	TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KING, JOHN M		NAME	Nixon, Alton M	
STREET ADDRESS	701 ALABAMA ST		STREET ADDRESS	Steep Head Road	
CITY-ST-ZIP	MILTON, FL 32570		CITY-ST-ZIP	Milton FL 32570	
TITLE	V	<input checked="" type="checkbox"/> Delete	TITLE	V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SHAFTER, GEORGE		NAME	Harold Morris	
STREET ADDRESS	10001 MURSON HWY		STREET ADDRESS	10390 Valley Grove Road	
CITY-ST-ZIP	MILTON, FL 32570		CITY-ST-ZIP	Milton FL 32570	
TITLE	S	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROWELL, GLADYS		NAME		
STREET ADDRESS	10290 MORRIS-ROWELL ROAD		STREET ADDRESS		
CITY-ST-ZIP	MILTON, FL 32570		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROBEY, MARIANNE		NAME		
STREET ADDRESS	3177 GEORGE CABANISS RD		STREET ADDRESS		
CITY-ST-ZIP	MILTON, FL 32570		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HARDY, CURTIS		NAME		
STREET ADDRESS	ROUTE 1, BOX 44		STREET ADDRESS		
CITY-ST-ZIP	MILTON, FL 32570		CITY-ST-ZIP		
TITLE	T	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MORRIS, BARBARA		NAME		
STREET ADDRESS	10390 VALLEY GROVE ROAD		STREET ADDRESS		
CITY-ST-ZIP	MILTON, FL 32570		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: <i>Barbara Morris</i>				DATE: 5-1-04	
Signature and typed or printed name of signing officer or director				Daytime Phone #: 850-957-4378	

Attachment 44045103
N97000001633

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
PO BOX 6327
TALLAHASSEE FLORIDA 32314

Dear Sirs,

This corporation was unable to download corporation forms and the postcard received was mailed back on March 3, 2004. The forms were not received, therefore we have been delayed in sending to you the correct forms needed for filing our annual report.

I do apologize for this delay.

Sincerely,

Barbara Morris

Barbara Morris, Treasurer