

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000004702

1. Entity Name

STATION 32 AUXILIARY FIRE DEPARTMENT, INC.

FILED
Feb 16, 2000 8:00 am
Secretary of State

02-16-2000 90060 036 ****61.25

Principal Place of Business

Mailing Address

185 SOUTH THIRD STREET
EAGLE LAKE FL 33839

POST OFFICE BOX 1240
EAGLE LAKE FL 33839-1240

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3478235

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

KEHOE, FRANK
111 REAM ROAD
WINTER HAVEN FL 33880

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEES 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 ☐ Delete
NAME P
STREET ADDRESS KEHOE, FRANK
CITY-ST-ZIP 111 REAM RD
WINTER HAVEN FL 33880

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME VP
STREET ADDRESS CRISS, RICHARD
CITY-ST-ZIP 265 2ND ST S
EAGLE LAKE FL 33839

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME ST
STREET ADDRESS CRISS, MICHELLE
CITY-ST-ZIP 265 2ND ST S
EAGLE LAKE FL 33839

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME D
STREET ADDRESS SEDGWICK, LINDA
CITY-ST-ZIP 55 DALE DR
WINTER HAVEN FL 33880

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Delete
NAME D
STREET ADDRESS TANNER, JEFF
CITY-ST-ZIP 500 AVE N S.E.
WINTER HAVEN FL 33880

TITLE ☒ Change ☐ Addition
NAME D
STREET ADDRESS Terry Stoelton
CITY-ST-ZIP 675 East Central Avenue
Eagle Lake, FL. 33839

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
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, will all other like empowered.

01-10-2000

(863)-297-5529

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #