

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000006090

1. Entity Name

O'BRIEN VOLUNTEER FIREFIGHTERS ASSOCIATION, INC.

Principal Place of Business

10121 CR 349
O'BRIEN FL 32071

Mailing Address

P.O. BOX 35
O'BRIEN FL 32071

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3510649

Applied For

Not Applicable

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

HUMPHRIES, HARRIETTE W
22677 93RD DRIVE
O'BRIEN FL 32071

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:
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 PD
NAME JONES, ROBERT ☒ Delete
STREET ADDRESS 22080 US 129
CITY-ST-ZIP O'BRIEN FL 32071

TITLE PD ☒ Change ☐ Addition
NAME HUMPHRIES, GEFREY
STREET ADDRESS 26677-93RD DRIVE
CITY-ST-ZIP O'BRIEN, FL, 32071

TITLE VD ☒ Delete
NAME HUMPHRIES, GEFREY
STREET ADDRESS 22677 - 93RD DRIVE
CITY-ST-ZIP O'BRIEN FL 32071

TITLE VD ☒ Change ☐ Addition
NAME HAROLD CURRY
STREET ADDRESS 23013-93RD DRIVE
CITY-ST-ZIP O'BRIEN, FL 32071

TITLE SD ☐ Delete
NAME CURRIE, BETSYSUSAN
STREET ADDRESS 6 BLACKBERRY LANE
CITY-ST-ZIP O'BRIEN FL 32071

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

TITLE TD ☒ Delete
NAME MEADOWS, GRANT W JR.
STREET ADDRESS P.O. BOX 224
CITY-ST-ZIP O'BRIEN FL 32071

TITLE TD ☒ Change ☐ Addition
NAME SMITH, MARY W.
STREET ADDRESS 23065-93RD DRIVE
CITY-ST-ZIP O'BRIEN, FL, 32071

TITLE D ☐ Delete
NAME MATTHEWS, FAYE
STREET ADDRESS 9730 222 LANE
CITY-ST-ZIP O'BRIEN FL 32071

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

TITLE D ☒ Delete
NAME SMITH, MARY W
STREET ADDRESS P.O. BOX 24
CITY-ST-ZIP O'BRIEN FL 32071

TITLE D ☒ Change ☐ Addition
NAME HUMPHRIES, HARRIETTE
STREET ADDRESS 22677-93RD DRIVE
CITY-ST-ZIP O'BRIEN, FL, 32071

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: *Mary W. Smith* REQUIRED MARY W. SMITH 4/28/01 (386) 935-0277

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

B0043986



DO NOT WRITE IN THIS SPACE

CR2E037 (10/00)