2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2005
Secretary of State

DOCUMENT# N97000006090

Entity Name: O'BRIEN VOLUNTEER FIREFIGHTERS ASSOCIATION, INC.

Current Principal Place of Business:

10121 CR 349
O'BRIEN, FL 32071

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 35
O'BRIEN, FL 32071

New Mailing Address:

P.O. BOX 58
O'BRIEN, FL 32071

FEI Number: 59-3510649 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HUMPHRIES, HARRIETTE W
22817 93RD. DRIVE
O"BRIEN, FL 32071 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: VD ( ) Delete
Name: CURRY, HAROLD
Address: 23013-93RD DRIVE
City-St-Zip: O'BRIEN, FL 32071

Title: PD ( ) Delete
Name: HUMPHRIES, GEFREY
Address: 22817 93RD. DRIVE
City-St-Zip: O"BRIEN, FL 32071

Title: D ( ) Delete
Name: HUMPHRIES, HARRIETTE
Address: 22817 93RD. DRIVE
City-St-Zip: O"BRIEN, FL 32071

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change ( ) Addition
Name: HUMPHRIES, HARRIETTE W
Address: 22817 93RD. DRIVE
City-St-Zip: O"BRIEN, FL 32071

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HARRIETTE W. HUMPHRIES SD 04/30/2005

Electronic Signature of Signing Officer or Director — Date