

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N99000001098

1. Entity Name
BASCOM VOLUNTEER FIRE DEPARTMENT, INC.



Principal Place of Business
4969 BASSWOOD RD
BASCOM, FL 32423

Mailing Address
P.O. BOX 121
BASCOM, FL 32423

FILED
Mar 03, 2008 08:00 A
Secretary of State



01312008 No Chg-NP CR2E037 (4/06)

4. FEI Number
31-1643679

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

RIDDLE, CLARK E
4956 LAUDERDALE LANE
BASCOM, FL 32423

**DO NOT WRITE
IN THIS SPACE**

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 _____

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

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
RIDDLE, CLARK E
4956 LAUDERDALE LANE
BASCOM, FL 32423

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
COOK, KENNETH
5044 LIBERTY HILL ROAD
BASCOM, FL 32423

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
ST
SOTHWELL, BRYANT
4862 GEORGIA ROAD
BASCOM, FL 32423

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U00000845438
03/13/08-80039-003 61.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: *Clark E. Riddle* (Clark E. Riddle) Feb 27, 2008 850-569-2589

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #