## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT 1998 DOCUMENT #



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

P97000094902 (8)

FIREHOUSE OF TALLAHASSEE #1, INC.

## **FILED** Apr 08 1998 8:00am Secretary of State



Principal Plac	ce of Business	Mailing Address				
10593 VALENTINE ROAD NORTH 10593 VALENTINE ROAD NORTH				l		
TALLAHASS	EE FL 32311	TALLAHASSEE FL 32311				
						DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
2. Principal F	Place of Business	2a. Mailing Address				11/05/1997 4. FEI Number   Lapplied For
11 1426 W. Tennessee St. 26						4. FEI Number Applied For S9 - 3476369 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				€0.7E Additional
22		27				5. Certificate of Status Desired Fee Required
City & Star	te	City & State	****			6. Election Campaign Financing \$5.00 May Be
23 0	shassee, FL	28				Trust Fund Contribution Added to Fees
Zip	Country	Zip	Co	untry		8. This corporation owes or has paid the current year Intangible
24 323		29	30			Personal Property Tax due June 30. 🔲 Yes 🔀 No
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Registered Agent
	OLMES, CHRISTOPHER C			81	Name	•
	0593 VALENTINE ROAD NORTH			82	Street	t Address (P.O. Box Number is Not Acceptable)
17	ALLAHASSEE FL 32311					
				83		
				84	City	85 Zip Code
44 0	4.0			Ш		FL   1   1
Office of I	redistered agent, or both, in the State o	of Florida, Such change was:	AUITONIZA	id hv	the cor	d corporation submits this statement for the purpose of changing its registered reporation's board of directors. I hereby accept the appointment as registered
agent. I a	am familiar with, and accept the obligat	ions of, Section 607.0505, FI	lorida Sta	tuteś		, , , , , , , , , , , , , , , , , , , ,
SIGNATURE						
12.	Signature, typied or printed name of registered agen OFFICERS AND		TE:Registere	d Age	nt signaturi	re required when reinstating)  DATE  ADDITIONS (CHANGES TO DESIGNED AND DIRECTORS AND
TITLE	OFFICE TO AND	DELETE	<del></del>	ITLE		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  President
NAME				AME		101 introduce C. Halmes
STREET ADDRESS				_	ADDRESS	Christopher C. Holmes 10593 Valentine Rd. No
CITY-ST-ZIP						Tallahassee, FL 32311
TITLE	-	DELETE		ITY-SI ITLE	- Zir	
NAME		<b>_</b>		AME		Vice President
STREET ADDRESS					ADDRESS	Vice President Change WAddition Lisa L. Holmes 10593 Valentine Rd. N.
CITY-ST-ZIP				OTY-S		Tallahassee, FU 32311
TITLE		DELETE		TLE	1 - EM	Change Addition
NAME			1 8	AME		
STREET ADDRESS				ŀ	NDDRESS	
CITY-ST-ZIP				ITY-\$		
TITLE		☐ DELETE		LE		Change Addition
NAME				ME		
STREET ADDRESS				REET	ADDRESS	
CITY-ST-ZIP				TY - ST	- ZIP	
TITLE		DELETE		TLE		Change Addition
NAME				AME		
STREET ADDRESS				TREET A	ADDRESS	
CITY-ST-ZIP				ITY-ST	- ZIP	
TITLE		☐ DELETE		TLE		☐ Change ☐ Addition
NAME			] <b>5</b> ,	AME		
STREET ADDRESS			<b>S</b> S	TREET A	<b>LOO</b> RESS	
CITY-ST-ZIP				ITY-ST		
14. I hereby o	certify that the information supplied with	this filing does not qualify for	or the	emnti	on state	ed in Section 119.07(3)(i), Florida Statutes. I further certify that the information
officer or Block 12	on this annual report or supplemental director of the corporation or the receiver Block 13 if changet, or on an attach	annual report is true and acc /er or trustee empowered to yne/it jvith an illodress.	executa i	d tha this r	t my sig aport as	gnature shall have the same legal effect as if made under cath; that I am an s required by Chapter 607, Florida Statutes; and that my name appears in