

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 723577

**Entity Name:** WEST END VOLUNTEER FIRE DEPARTMENT, INC. THE**Current Principal Place of Business:**20512 PANAMA CITY BEACH PARKWAY  
PANAMA CITY BEACH, FL 32413**Current Mailing Address:**POST OFFICE BOX 9345  
PANAMA CITY BEACH, FL 32417**FEI Number:** 59-1748210**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**ISLER, CHARLES S.  
434 MAGNOLIA AVE.  
PANAMA CITY, FL 32407 US*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**Officer/Director Detail :**

Title	P
Name	HENRIQUES, ANTHONY
Address	212 DOGWOOD APT. C
City-State-Zip:	PANAMA CITY BEACH FL 32407

Title	TR
Name	LEE, JAMES
Address	13207 FERNWOOD PL.
City-State-Zip:	PANAMA CITY BEACH FL 32407

Title	TR
Name	FARMER, STEPHANIE
Address	7324 BEACH DR.
City-State-Zip:	PANAMA CITY BEACH FL 32408

Title	S
Name	HENRIQUES, TAMRA
Address	212 DOGWOOD APT. C
City-State-Zip:	PANAMA CITY BEACH FL 32407

Title	TR
Name	HENRIQUES, CHRIS
Address	611 GARDENIA APT. B
City-State-Zip:	PANAMA CITY BEACH FL 32407

Title	TR
Name	FARMER, DEWAYNE
Address	7324 BEACH DR.
City-State-Zip:	PANAMA CITY BEACH FL 32408

*I hereby 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 all other like empowered.*

**SIGNATURE:** ANTHONY HENRIQUES

P

09/15/2015

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date