

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 750998

Entity Name: PINETTA VOLUNTEER FIRE AND RESCUE, INC.**Current Principal Place of Business:**509 NE PERSIMMON DR.
PINETTA, FL 32350**Current Mailing Address:**10129 NE COLIN KELLY HWY
PINETTA, FL 32350 US**FEI Number:** NOT APPLICABLE**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**REEVES, GEORGE T
901 WEST BASE
MADISON, FL 32340 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:** GEORGE T. REEVES

04/14/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name FINNEY, DOUG
Address 203 NE JOAN AVE
City-State-Zip: MADISON FL 32340

Title VP
Name SHEWCHUK, WAYNE
Address 438 NE ENGLISH IVY TR.
City-State-Zip: PINETTA FL 32350

Title S
Name SPIRES, VICTORIA
Address P.O. BOX 53
City-State-Zip: PINETTA FL 32350

Title T
Name SHADRICK, ALLEN
Address 10129 NW COLON KELLY HWY
City-State-Zip: PINETTA FL

Title BOD
Name SPIRES, VICKY
Address P.O. BOX 53
City-State-Zip: PINETTA FL 32350

Title BOD
Name SHADRICK, TYLER
Address 267 NE PERSIMMON STREET
City-State-Zip: PINETTA FL 32350

Title BOD
Name DEMMING, STEVEN
Address 10129 NE COLIN KELLY HWY
City-State-Zip: PINETTA FL 32350

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: ALLEN SHADRICK

CHIEF

04/14/2021

Electronic Signature of Signing Officer/Director Detail

Date