

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 763346

Entity Name: SUNLAKE VOLUNTEER FIRE DEPARTMENT, INC.**Current Principal Place of Business:**1101 SAINT LAWRENCE DR
GRAND ISLAND, FL 32735-9729**Current Mailing Address:**1101 SAINT LAWRENCE DR
GRAND ISLAND, FL 32735-9729**FEI Number:** 59-2950981**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**BAUMAN, MARILYN C
1375 WARMWOOD DRIVE
GRAND ISLAND, FL 32735-9729 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	PRES
Name	BAUMAN, MARILYN PRES
Address	1375 WARMWOOD DRIVE
City-State-Zip:	GRAND ISLAND FL 32735

Title	VP
Name	FUKUI, SHIRLEY
Address	1020 LAKE DR.
City-State-Zip:	GRAND ISLAND FL 32725

Title	SEC
Name	CRULL, BETH
Address	2533 POTOMAC PATH
City-State-Zip:	GRAND ISLAND FL 32735

Title	OTHER, CHIEF
Name	WARD, TED
Address	1860 CAPE COD COVE
City-State-Zip:	GRAND ISLAND FL 32725

Title	OTHER, ASSISTANT CHIEF
Name	BAUMAN, WILLIAM EDWIN
Address	1375 WARMWOOD DR.
City-State-Zip:	GRAND ISLAND FL 32735

Title	TREASURER
Name	CARVER, DARLENE
Address	1560 ST. LAWRENCE DR.
City-State-Zip:	GRAND ISLAND FL 32735

Title	OTHER, ASSISTANT SECRETARY/ TREASURER
Name	ADAMS, RICHARD
Address	2522 POTOMAC PATH
City-State-Zip:	GRAND ISLAND FL 32735

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: MARILYN BAUMAN**PRESIDENT/CEO****02/27/2018**_____
Electronic Signature of Signing Officer/Director Detail_____
Date