

2019 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N07000009729

Entity Name: DAVIE FIRE RESCUE BENEVOLENT ASSOCIATION, INC.**Current Principal Place of Business:**8930 STATE ROAD 84 #321
DAVIE, FL 33324**Current Mailing Address:**8930 STATE ROAD 84 #321
DAVIE, FL 33324**FEI Number: 26-2153243****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**VENTRE, CARLEY EVELYN
8930 WEST STATE ROAD 84 #321
DAVIE, FL 33324 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:** CARLEY VENTRE

01/11/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRES
Name	VENTRE, CARLEY E
Address	8930 STATE ROAD 84 #321
City-State-Zip:	DAVIE FL 33324
Title	TRES
Name	RYNNING, ERIC MR.
Address	8930 WEST STATE ROAD 84, #321
City-State-Zip:	DAVIE FL 33324
Title	A SHIFT REPRESENTATIVE
Name	RICHARDS , SCOTT
Address	8930 STATE ROAD 84 #321
City-State-Zip:	DAVIE FL 33324
Title	C SHIFT REPRESENTATIVE
Name	TORRES , RAFAEL
Address	8930 STATE ROAD 84 #321
City-State-Zip:	DAVIE FL 33324

Title	VP
Name	ALLEN, ADAM
Address	8930 STATE ROAD 84 #321
City-State-Zip:	DAVIE FL 33324
Title	SEC
Name	QUINONES, ROBERTA MS.
Address	8930 WEST STATE ROAD 84, #321
City-State-Zip:	DAVIE FL 33324
Title	B SHIFT REPRESENTATIVE
Name	EDGHILL, BRENT
Address	8930 STATE ROAD 84 #321
City-State-Zip:	DAVIE FL 33324

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: ERIC RYNNING**TREASURER**

01/11/2019

Electronic Signature of Signing Officer/Director Detail

Date