

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32926

Entity Name: BEACON WOODS AMBULANCE FUND, INC.

Current Principal Place of Business:

12440 CLOCKTOWER PARKWAY
BAYONET POINT, FL 34667

Current Mailing Address:

12440 CLOCKTOWER PARKWAY
BAYONET POINT, FL 34667 US

FEI Number: 59-2964641

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

HUBER, KENNETH E
13011 WESTERN CIRCLE
BAYONET POINT, FL 34667 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: KENNETH E. HUBER

03/09/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title SECRETARY
Name MANNUCCI, CATHERINE
Address 8023 BEAVER CREEK LOOP
City-State-Zip: BAYONET POINT FL 34667

Title DIRECTOR
Name GRAVES, FRANK
Address 12505 MERRY LANE
City-State-Zip: BAYONET POINT FL 34667

Title DIRECTOR
Name WEBSTER, CHARLES
Address 12307 SPANISH MOSS DRIVE
City-State-Zip: BAYONET POINT FL 34667

Title VP
Name HUBBS, RONALD B
Address 8205 VALLEY STREAM LANE
City-State-Zip: BAYONET POINT FL 34667

Title PRESIDENT
Name GILLIGAN, JAMES F
Address 12822 IRONWOOD CIRCLE
City-State-Zip: BAYONET POINT FL 34667

Title TREASURER
Name HUBER, KENNETH E
Address 13011 WESTERN CIRCLE
City-State-Zip: BAYONET POINT FL 34667

Title DIRECTOR
Name RANDALL, DIXIE
Address 12525 DEARBORN DRIVE
City-State-Zip: BAYONET POINT FL 34667

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: KENNETH E. HUBER

TREASURER

03/09/2020

Electronic Signature of Signing Officer/Director Detail

Date