2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000331

Entity Name: MICCOSUKEE VOLUNTEER FIRE-RESCUE, INC.

FILED
Mar 04, 2024
Secretary of State
7193731943CC

Current Principal Place of Business:

15013 CROMARTIE RD MICCOSUKEE. FL 32309

Current Mailing Address:

P O BOX 13752

MICCOSUKEE. FL 32317 US

FEI Number: 31-1592669 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CARROLL, BRIAN 13800 MOCCASIN GAP RD. MICCOSUKEE, FL 32309 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: BRIAN CARROLL 03/04/2024

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PRESIDENT Title COO

Name DOYLE, PHILIP Name CARROLL, BRIAN

Address 775 HIAWATHAW FARMS RD Address 13800 MOCCASSIN GAP

City-State-Zip: MONTICELLO FL 32344 City-State-Zip: TALLAHASSEE FL 32309

Title TREASURER Title OFFICER

Name BROWN, TODD Name COHEN, SCOTT

Address 473 GREAT OAKS BLVD. Address 14006 ENGLISH GARDEN LN.

City-State-Zip: MONTICELLO FL 32344 City-State-Zip: MICCOSUKEE FL 32309

Title SECRETARY Title VP

Name JONES, EVELYN Name BENTON, JEFFERY

Address 10198 MOCCASIN GAP RD Address 8652 SHIRE RIDGE LOOP

City-State-Zip: TALLAHASSEE FL 32309 City-State-Zip: MICCOSUKEE FL 32309

City-State-Zip: TALLAHASSEE FL 32309

Title OFFICER

Name COGSWELL, KELLY

Address 3560 JEFFERSON RD S City-State-Zip: TALLAHASSEE FL 32317

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: BRIAN CARROLL CHIEF 03/04/2024