

FILE NOW: FILING FEE IS \$61.25

FILED

**May 19 1998 8:00am
Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 711351 (7)
1. Corporation Name
OCHLOCKNEE BAY VOLUNTEER FIRE DEPARTMENT, INC.



Principal Place of Business Mailing Address
HIGHWAY 98 & BAY PARK P O BOX 101 PANACEA FL 32346
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3. Date Incorporated or Qualified
08/16/1966

4. FEI Number
59-1929105

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

7. Is this nonprofit corporation a homeowners association? Yes No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip Country 28 Zip Country

24 25 29 30

9. Name and Address of Current Registered Agent

**LANGSTON, WILLIAM R.
SURF ROAD
PANACEA FL 32346**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	LANGSTON, WILLIAM R	1.2 NAME	BOAT POOLE
STREET ADDRESS	RIVIER VIEW #3	1.3 STREET ADDRESS	41 BLUE GRAB LANE
CITY-ST-ZIP	PANACEA, FL 00000	1.4 CITY-ST-ZIP	PANACEA, FL 32246
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DAY, WILLIAM J	2.2 NAME	
STREET ADDRESS	58 SILVER AVRES	2.3 STREET ADDRESS	
CITY-ST-ZIP	PANACEA FL	2.4 CITY-ST-ZIP	
TITLE	<input checked="" type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	WYANT, ROBERT	3.2 NAME	RAYMOND LOVE
STREET ADDRESS	88 WAKULLA CIRCLE	3.3 STREET ADDRESS	15 LAKEWOOD DRIVE
CITY-ST-ZIP	PANACEA FL	3.4 CITY-ST-ZIP	PANACEA, FL
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JONES, HERMAN J	4.2 NAME	
STREET ADDRESS	28 AUTUMM LANE	4.3 STREET ADDRESS	
CITY-ST-ZIP	PANACEA FL	4.4 CITY-ST-ZIP	
TITLE	<input checked="" type="checkbox"/> DELETE	5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	POTTER, HARRY	5.2 NAME	HARRY POTTER
STREET ADDRESS	P.O. BOX 460, 2875 SURF ROAD	5.3 STREET ADDRESS	2675 SURF ROAD
CITY-ST-ZIP	PANACEA FL	5.4 CITY-ST-ZIP	PANACEA, FL
TITLE	<input checked="" type="checkbox"/> DELETE	6.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WYANT, CHARLES W	6.2 NAME	WYANT CHARLES W.
STREET ADDRESS	57 WAKULLA CIRCLE	6.3 STREET ADDRESS	57 WAKULLA CIRCLE
CITY-ST-ZIP	PANACEA FL	6.4 CITY-ST-ZIP	PANACEA, FL

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *William R. Langston*

CR2E037 (10/97)