2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2009
Secretary of State

DOCUMENT# 759050

Entity Name: ICHETUCKNEE/SOUTH COLUMBIA VOLUNTEER FIRE DEPARTMENT, INC.

Current Principal Place of Business:

495 SW DORCH STREET
FORT WHITE, FL 32038 US

New Principal Place of Business:

Current Mailing Address:

495 SW DORCH STREET
FORT WHITE, FL 32038 US

New Mailing Address:

FEI Number: 59-2918788 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HUDSON, Z E
386 SW BRYANT AVE
FORT WHITE, FL 32038 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: ST ( ) Delete
Name: LITTRELL, WALTER JR
Address: 635 MURDOCK COURT
City-St-Zip: FORT WHITE, FL 32038

Title: V ( ) Delete
Name: O'STEEN L.
Address: C-138
City-St-Zip: FORT WHITE, FL 32038

Title: P ( ) Delete
Name: HUDSON, Z E
Address: S BRYANT ST, PO 12
City-St-Zip: FT WHITE, FL 00000,

Title: D ( ) Delete
Name: LANCE, JIM
Address: P O BOX 152 SR 47
City-St-Zip: FORT WHITE, FL 32038

Title: D ( ) Delete
Name: KORN, ROBERT
Address: 1405 SW JACOBS CT
City-St-Zip: FORT WHITE, FL 32038

Title: D ( ) Delete
Name: WHITLEY, WILLIAM E.
Address: RT 2 BOX 945 N/A
City-St-Zip: HIGH SPRINGS, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: MILLER, MICHAEL C
Address: PO BOX 998
City-St-Zip: FORT WHITE, FL 32038

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: Z E HUDSON P 04/23/2009

Electronic Signature of Signing Officer or Director — Date