

PETITION FOR THE ANNEXATION  
OF CERTAIN PRESCRIBED PROPERTY TO  
COMMUNITY FACILITIES DISTRICT NO. 94-01 (HESPERIA)

**TO THE BOARD OF DIRECTORS OF THE SAN BERNARDINO COUNTY FIRE PROTECTION DISTRICT:**

Pursuant to Section 53339.2 of the California Government Code, the undersigned, as the authorized representative of Floyd Family Trust (the "Owner"), hereby represents and petitions as follows:

1. The Owner is the sole owner of the real property (the "Subject Property"), shown on the exhibit map attached hereto as Exhibit A and also identified as Assessor's Parcel Number(s) 3039-321-08-0-000 which real property is situated within the San Bernardino County Fire Protection District
2. The Owner hereby petitions this Board of Directors (this "Board") to: (a) initiate and conduct legal proceedings pursuant to the provisions of the Mello-Roos Community Facilities Act of 1982, (Section 53311 et seq. of the California Government Code) (the "Act"), for the annexation of the Subject Property to the existing Community Facilities District No. 94-01 (Hesperia), San Bernardino County Fire Protection District, State of California ("CFD No. 94-01"); and (b) conduct a landowner election in accordance with the Act to obtain authorization to annex the Subject Property into CFD 94-01 and thereby authorize to levy the previously-established special tax for fire suppression services of CFD 94-01 on the Subject Property.

Respectfully Submitted,

By:

  
Signature

David Floyd  
Printed Name and Title

9/20/2022  
Date

Standard California Notary Acknowledgment Form Attached

# CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

CIVIL CODE § 1189

State of California

County of Riverside

On September 20, 2022 before me,

Sheri Corey, Notary Public  
Here Insert Name and Title of the Officer

personally appeared

John David Floyd  
Name(s) of Signer(s)

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that ~~he/she/they~~ executed the same in ~~his/her/their~~ authorized capacity(ies), and that by ~~his/her/their~~ signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.



Place Notary Seal Above

Signature: Sheri Corey

Signature of Notary Public

## OPTIONAL

*Though the information below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.*

### Description of Attached Document

Title or Type of Document: \_\_\_\_\_

Document Date: \_\_\_\_\_

Number of Pages: \_\_\_\_\_

Signer(s) Other Than Named Above: \_\_\_\_\_

### Capacity(ies) Claimed by Signer(s)

Signer's Name: \_\_\_\_\_

☐ Corporate Officer — Title(s): \_\_\_\_\_

☐ Individual

☐ Partner — ☐ Limited ☐ General

☐ Attorney in Fact

☐ Trustee

☐ Guardian or Conservator

☐ Other: \_\_\_\_\_

Signer Is Representing: \_\_\_\_\_

RIGHT THUMBPRINT  
OF SIGNER  
Top of thumb here

Signer's Name: \_\_\_\_\_

☐ Corporate Officer — Title(s): \_\_\_\_\_

☐ Individual

☐ Partner — ☐ Limited ☐ General

☐ Attorney in Fact

☐ Trustee

☐ Guardian or Conservator

☐ Other: \_\_\_\_\_

Signer Is Representing: \_\_\_\_\_

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OF SIGNER  
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