

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 763354

1. Entity Name

VIETNAM VETERANS OF AMERICA CHAPTER #23, FT. LAU

Principal Place of Business

13181 SW 7TH PLACE
C/O CHARLES BANTOS
DAVID FL 33325

Mailing Address

13181 SW 7TH PLACE
C/O CHARLES BANTOS
DAVIE FL 33325-3728

2. Principal Place of Business

PATRICK J. DUNNE

3. Mailing Address

V.V.A. 23

Suite, Apt. #, etc.

2247 LINCOLN STREET

Suite, Apt. #, etc.

P.O. Box 551840

City & State

HOLLYWOOD, FL

City & State

FT. LAUDERDALE, FL

Zip

33020

Country

U.S.A.

Zip

33355

Country

U.S.A.

6. Name and Address of Current Registered Agent

BANTO, CHARLES
13181 S.W. 7TH PL
DAVIE FL 33325

7. Name and Address of New Registered Agent

Name PATRICK J. DUNNE

Street Address (P.O. Box Number is Not Acceptable)

2247 LINCOLN STREET

City

FT. LAUDERDALE

FL

Zip Code

33020

8. 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

Patrick J. Dunne

PATRICK J. DUNNE

4/20/00

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	BANTOS, CHARLES	
STREET ADDRESS	13181 SW 7TH PL	
CITY-ST-ZIP	DAVIE FL	
TITLE	VP	<input checked="" type="checkbox"/> Delete
NAME	CHOMIAK, STEVEN M	
STREET ADDRESS	555 S LUNA CT 333	
CITY-ST-ZIP	HOLLYWOOD FL	
TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	ROSS, BRUCE	
STREET ADDRESS	2731 N.W. 108 TERR	
CITY-ST-ZIP	FT LAUDERDALE FL	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	JEFRA, JEFF	
STREET ADDRESS	2901 SW 154 LN	
CITY-ST-ZIP	DAVIE FL	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	DAVIS, MARK	
STREET ADDRESS	4950 SW 18TH ST	
CITY-ST-ZIP	DAVIE FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	ROSS, BRUCE	
STREET ADDRESS	2731 NW 108TH TERR	
CITY-ST-ZIP	FT LAUDERDALE FL	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PATRICK J. DUNNE	
STREET ADDRESS	2247 LINCOLN ST	
CITY-ST-ZIP	HOLLYWOOD, FL 33020	
TITLE	VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HERBERT L. HANKESSON	
STREET ADDRESS	2311 N.W. 38TH AVE	
CITY-ST-ZIP	LAUDERDALE, FL 33311	
TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JOHN ROXEY	
STREET ADDRESS	800 N.E. 45TH ST	
CITY-ST-ZIP	FT. LAUDERDALE, FL 33334	
TITLE	T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MARK M. DAVIS	
STREET ADDRESS	4950 S.W. 18TH ST	
CITY-ST-ZIP	FT. LAUDERDALE, FL 33317	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WILLIAM D. ECKARD	
STREET ADDRESS	5953 N.W. 24TH PL	
CITY-ST-ZIP	SUNRISE FL 33313	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Mark M. Davis*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/20/00

Date

(954) 850-1956

Daytime Phone #

CR2E037 (9/99)