

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04106

FILED
Apr 13, 2006
Secretary of State

Entity Name: VIETNAM VETERANS OF AMERICA, CHAPTER 121, MIAMI, FLORIDA, INC.

Current Principal Place of Business:

45 ALMERIA AVE.
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

P O BOX 14-2141
CORAL GABLES, FL 331142141 US

New Mailing Address:

FEI Number: 59-2508261 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ORTIZ, EPIE
11794 SW 273RD LANE
HOMESTEAD, FL 330323385 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: VP () Delete
Name: THORP, JOHN
Address: 12370 SW 225 ST
City-St-Zip: MIAMI, FL 331704436

Title: S () Delete
Name: FISCHER, EDWARD
Address: 10401 SW 82ND CT
City-St-Zip: MIAMI, FL 331563548

Title: VP () Delete
Name: MCMANUS, BRUCE
Address: 13630 SW 96 ST
City-St-Zip: MIAMI, FL 331862211

Title: D () Delete
Name: ORTEZ, EPIE
Address: 11794 SW 273RD LANE
City-St-Zip: HOMESTEAD, FL 330323385

Title: T () Delete
Name: LEE, GARY R
Address: 1270 SW 30TH STREET
City-St-Zip: MIAMI, FL 331752222

Title: P () Delete
Name: KOVAC, ALEXANDER
Address: 14510 SW 108TH STREET
City-St-Zip: MIAMI, FL 33186

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: LEE, GARY
Address: 12270 SW 30 ST
City-St-Zip: MIAMI, FL 331752222

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

I hereby certify that the information supplied with this filing does not qualify for the 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: GARY R. LEE

Electronic Signature of Signing Officer or Director

D

04/13/2006

Date