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Feb 19 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # **N44203 (0)**

1. Corporation Name
SPANISH-AMERICAN VETERANS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
P. O. BOX 447 MELBOURNE FL 32902	P. O. BOX 447 MELBOURNE FL 32902-0447

3. Date Incorporated or Qualified: 07/05/1991
3a. Date of Last Report: 02/02/1996

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip
24
Country
25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip
29
Country
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4. FEI Number: 59-3063873 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired XX **$8.75** Additional Fee Required

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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

ROMERO, FRANK
178 NEMO CIRCLE N/E
PALM BAY FL 32907

10. Name and Address of New Registered Agent

81 Name: Lupe M. Clowney
82 Street Address (P.O. Box Number is Not Acceptable): 401 Lighthouse Landing St.
83
84 City: Satellite Beach **FL** 85 Zip Code: 32937

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: Lupe M. Clowney 2-15-97
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☐ DELETE	1.1 TITLE	P	☒ Change ☐ Addition
NAME	ROMERO, FRANK		1.2 NAME	LUPE M. CLOWNEY	
STREET ADDRESS	178 NEMO CIRCLE N/E		1.3 STREET ADDRESS	401 Lighthouse Landing St.	
CITY-ST-ZIP	PALM BAY FL 32907		1.4 CITY-ST-ZIP	Satellite Beach, FL 32937	
TITLE	V	☐ DELETE	2.1 TITLE	V	☒ Change ☐ Addition
NAME	SUTU, HECTOR C		2.2 NAME	RAUL RIVERA	
STREET ADDRESS	888 DAMASK ST. N/E		2.3 STREET ADDRESS	2975 Gemini Ave N.E.	
CITY-ST-ZIP	PALM BAY FL 32905		2.4 CITY-ST-ZIP	Palm Bay, FL 32905	
TITLE	S	☐ DELETE	3.1 TITLE	S	☒ Change ☐ Addition
NAME	CLOWNEY, LUPE		3.2 NAME	PEDRO FERNANDEZ	
STREET ADDRESS	401 LIGHTHOUSE LANDING ST.		3.3 STREET ADDRESS	1500 Wigmore St. S.E.	
CITY-ST-ZIP	SATELLITE BEACH FL 32937		3.4 CITY-ST-ZIP	Palm Bay, FL 32909	
TITLE	T	☐ DELETE	4.1 TITLE	T	☒ Change ☐ Addition
NAME	VEGAS, DANIEL		4.2 NAME	RAFAEL PEDRAZA	
STREET ADDRESS	170 VIN ROSE CIRCLE S/E		4.3 STREET ADDRESS	1895 Blaine St. N.E.	
CITY-ST-ZIP	PALM BAY FL		4.4 CITY-ST-ZIP	Palm Bay, FL 32905	
TITLE	D	☐ DELETE	5.1 TITLE	Tr	☒ Change ☐ Addition
NAME	MARRERO, JUAN		5.2 NAME	JUAN MARRERO	
STREET ADDRESS	6790 BABCOCK ST. S/E		5.3 STREET ADDRESS	6790 Babcock St. S.E	
CITY-ST-ZIP	PALM BAY FL 32909		5.4 CITY-ST-ZIP	Palm Bay, FL 32909	
TITLE	D	☐ DELETE	6.1 TITLE	Tr	☒ Change ☐ Addition
NAME	PEDRAZA, RAFAEL		6.2 NAME	ELSA KEKAHUNA	
STREET ADDRESS	1895 BLAINE ST. NE		6.3 STREET ADDRESS	2395 King Richard Rd	
CITY-ST-ZIP	PALM BAY FL		6.4 CITY-ST-ZIP	Melbourne, FL 32935	

CR2E037 (9/96)

14. I do 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: Raul Rivera RAUL RIVERA Jan 19, 1997 (407) 723-8231
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone # 0016502