

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000000641

FILED  
Apr 03, 2012  
Secretary of State

**Entity Name:** VETERANS LAW CENTER, INC.

**Current Principal Place of Business:**

3407 RILEY ROAD  
DOUGLASVILLE, GA 30134 US

**New Principal Place of Business:**

**Current Mailing Address:**

3407 RILEY ROAD  
DOUGLASVILLE, GA 30134 US

**New Mailing Address:**

P.O. BOX 1426  
DOUGLASVILLE, GA 30133 US

**FEI Number:** 26-1822334

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LOEFFLER, KATHE ESQ  
9545 SAN JOSE BLVD  
JACKSONVILLE, FL 32257 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:** P  
**Name:** MOROZ, HAROLD R  
**Address:** 3407 RILEY ROAD  
**City-St-Zip:** DOUGLASVILLE, GA 30134 US

**Title:** VP  
**Name:** LOEFFLER, KATHE  
**Address:** 9545 SAN JOSE BLVD  
**City-St-Zip:** JACKSONVILLE, FL 32257 US

**Title:** PIO  
**Name:** HASSON, KEVIN A  
**Address:** 621 EAST DEVONHURST LANE  
**City-St-Zip:** PONTE VEDRA, FL 32081 US

I hereby 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 all other like empowered.

**SIGNATURE:** HAROLD RONALD MOROZ

PRES

04/03/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date