

**2021 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# N13000007623

**Entity Name:** VIETNAM VETERANS OF AMERICA, CHAPTER #1084, INC.

**Current Principal Place of Business:**

6184 US 1 NORTH  
ST AUGUSTINE, FL 32086

**Current Mailing Address:**

PO BOX 860151  
ST AUGUSTINE, FL 32086 US

**FEI Number:** 46-3758864

**Certificate of Status Desired:** Yes

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

SORRENTINO, SALVATORE J  
6184 US 1 NORTH  
ST AUGUSTINE, FL 32086 US

*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:** SALVATORE J SORRENTINO

09/27/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            SORRENTINO, SALVATORE J  
Address        6184 US 1 NORTH  
City-State-Zip: ST AUGUSTINE FL 32086

Title            VP1  
Name            WHITFIELD, JOANN  
Address        PO BOX 860151  
City-State-Zip: ST AUGUSTINE FL 32084

Title            VP2  
Name            HAINES, DOUGLAS  
Address        PO BOX 860151  
City-State-Zip: ST AUGUSTINE FL 32086

Title            TREASURER  
Name            HOWARD, RONNIE E  
Address        PO BOX 860151  
City-State-Zip: ST AUGUSTINE FL 32086

Title            SECRETARY  
Name            CRUTCHFIELD, JAMES  
Address        PO BOX 860151  
City-State-Zip: ST AUGUSTINE FL 32086

Title            DIRECTOR  
Name            JEFFERSON, WILLIAM  
Address        PO BOX 860151  
City-State-Zip: ST AUGUSTINE FL 32086

Title            DIRECTOR  
Name            HAHN, KENNETH  
Address        PO BOX 860151  
City-State-Zip: ST AUGUSTINE FL 32086

*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:** SALVATORE J SORRENTINO

PRESIDENT

09/27/2021

Electronic Signature of Signing Officer/Director Detail

Date