

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N13000009385

**FILED**  
**Feb 21, 2015**  
**Secretary of State**  
**CC842222068**

**Entity Name:** VETERANS CYBER WORLD INC.

**Current Principal Place of Business:**

39 SEMINOLE DRIVE  
PRETO SECTION  
COMMACK, NY 11725

**Current Mailing Address:**

39 SEMINOLE DRIVE  
PRETO SECTION  
COMMACK, NY 11725 US

**FEI Number:** 46-4550090

**Certificate of Status Desired:** No

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

FEELEY, THOMAS  
17201 COLLINS AVENUE  
APARTMENT 3405  
SUNNY ISLES BEACH, FL 33160 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title DIRECTOR AND MANAGING DIRECTOR  
Name PRETO, ELAINE  
Address 39 SEMINOLE DRIVE  
City-State-Zip: COMMACK, NY 11725

Title S  
Name FASSOULIS, SATIRIS G  
Address 1118 42ND STREET  
City-State-Zip: BROOKLYN NY 11219

Title DIRECTOR  
Name DEAN, CAROLE  
Address 1455 MANDALAY BEACH ROAD  
City-State-Zip: OXNARD CA 93035

Title DIRECTOR  
Name DALY, BRENDAN  
Address 36 SEMINOLE DRIVE  
City-State-Zip: COMMACK NY 11725

Title DIRECTOR  
Name LAWRENCE, VICTOR DR.  
Address 3 SUSSEX ROAD  
City-State-Zip: HOMDEL NJ 07733

Title DIRECTOR  
Name POMEROY, LEON DR.  
Address PO BOX 7135  
City-State-Zip: WOODBRIDGE VA 22105

*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:** SATIRIS FASSOULIS

**SECRETARY**

**02/21/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date