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. 03/29/2015 SIGNATURE: ELLSWORTH WILLIAMS JR

Electronic Signature of Signing Officer/Director Detail

TAMPA, FL 33609 **Current Mailing Address:**

Current Principal Place of Business:

DOCUMENT# N1400002884

4100 W. KENNEDY BLVD., SUITE 326

P.O. BOX 780025 ORLANDO, FL 32878

FEI Number: 46-4123917

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

WILLIAMS, ELLSWORTH JR. 1045 WINDMILL GROVE CIRCLE ORLANDO, FL 32828 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:

Officer/Director Detail :				
Title	DP	Title	DC	
Name	WILLIAMS, ELLSWORTH JR.	Name	JACKSON, JATUANA	
Address	1045 WINDMILL GROVE CIRCLE	Address	3522 SUNSET ISLES BLVD	
City-State-Zip:	ORLANDO FL 32828	City-State-Zip:	KISSIMMEE FL 34746	

Title	DS	Title	D
Name	BENIQUEZ, MARIELLE	Name	FENTON, MISTY
Address	1918 PITSENBARGER CIRCLE	Address	4100 W. KENNEDY BLVD., SUITE 326
City-State-Zip:	TAMPA FL 33621	City-State-Zip:	TAMPA FL 33609

Certificate of Status Desired: Yes

Date

FILED Mar 29, 2015 Secretary of State CC0630258513

Date

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: VETERANS COUNSELING VETERANS INCORPORATED

PRESIDENT