

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N18000003495

**Entity Name:** VETERANS OF WESTON, CORP

**Current Principal Place of Business:**

873 SAND CREEK CIRCLE  
WESTON, FL 33337

**Current Mailing Address:**

873 SAND CREEK CIRCLE  
WESTON, FL 33337

**FEI Number:** 31-1222502

**Certificate of Status Desired:** Yes

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

JIMENEZ, FRANCISCO  
873 SAND CREEK CIRCLE  
WESTON, FL 33327 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 P  
Name JIMENEZ, FRANCISCO  
Address 873 SAND CREEK CIRCLE  
City-State-Zip: WESTON FL 33337

Title DIR  
Name MOLINA MACFIE, MARY  
Address 230 LAKEVIEW DR #102  
City-State-Zip: WESTON FL 33326

Title VP  
Name RIVERA, ANGEL  
Address 3697 HERON RIDGE LANE  
City-State-Zip: WESTON FL 33331

Title TRES  
Name RELEFORD, JOSHUA  
Address 4432 DOGWOOD CIR  
City-State-Zip: WESTON FL 33331

*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:** MOLINA MACFIE, MARY

**DIR**

**03/08/2023**

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

\_\_\_\_\_  
Date