2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2004
Secretary of State

DOCUMENT# 708777

Entity Name: VETERANS COUNCIL OF HILLSBOROUGH COUNTY, INC.

Current Principal Place of Business:

VETERANS PARK & MUSEUM
3602 HIGHWAY 301 NO
TAMPA, FL 33619 US

New Principal Place of Business:

Current Mailing Address:

3602 HIGHWAY 301 NO
TAMPA, FL 33619 US

New Mailing Address:

FEI Number: 59-2956581 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BRAUN, DAVE
510 ROBIN HILL CIRCLE
BRANDON, FL 33510 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 ( ) Delete
Name: CAROLINA, LEROY
Address: 1516 STORINGTON AVENUE
City-St-Zip: BRANDON, FL 33511

Title: VD ( ) Delete
Name: RITTER, BEN
Address: 121 W 122ND AV
City-St-Zip: TAMPA, FL 33612

Title: VD ( ) Delete
Name: MACDONALD, AL
Address: 11830 GROVEWOOD AV
City-St-Zip: THONOTOSASSA, FL 33592

Title: VD ( ) Delete
Name: DOYLE, AL
Address: 1817 BRANDON BROOK RD
City-St-Zip: VALRICO, FL 33594

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: BRAUN, DAVE
Address: 510 ROBIN HILL CR.
City-St-Zip: BRANDON, FL 33510

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DAVE BRAUN P 04/19/2004
Electronic Signature of Signing Officer or Director Date