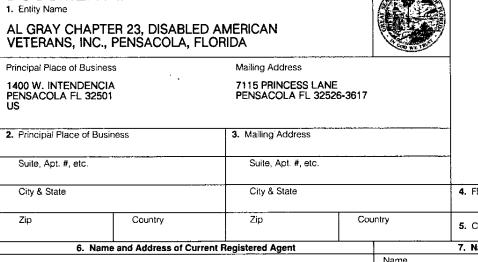
## 2004 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

## DOCUMENT # 736738



**FILED** Feb 10, 2004 8:00 am **Secretary of State** 

02-10-2004 90007 017 \*\*\*\*61.25

VETERANS, INC., PENSACOLA, FLORIDA				T. C. C.					
Principal Place of Bu	Mailing Address								
1400 W. INTENDENCIA PENSACOLA FL 32501 US		7115 PRINCESS LANE PENSACOLA FL 32526-3617							
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			МС	OORE (	CR2E037	(11/03)	
City & State		City & State			4. FEI Number		·	· Ap	plied For
					59	9-1729289			t Applicable
Zip Country		Zip	Country		5. Certificate of Sta	itus Desired		<b>8.75</b> Add ee Require	
6.	Name and Address of Current F	Registered Agent			7. Name and Addr	ess of New Reg	istered Ag	ent	
لسيند الراد الرياسية الرياسية والمحيد والمحاص الما المتحاض الما ويتوام الرياض التي التي التي الما التي المحيد				Name					
KYSER, LARRY 7115 PRINCESS LANE			Street A	Street Address (P.O. Box Number is Not Acceptable)					
PENSAC	OLA FL 32526-3617								
			City				FL	Zip Code	e
8. 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. I am familiar with, and accept									
	f registered agent.	the purpose of changing he	9,0,0,00		v- vg, v,				
CIONATURE									
SIGNATURE ————————————————————————————————————									
FILE NOW: FEE IS \$61.25  9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees Florida Department of State									
10.	OFFICERS AND DIR	ECTORS	11.		ADDITIONS/CHANGE	S TO OFFICERS	S AND DIRE	CTORS IN	10
ITILE D	RE JOHN E	🙀 Delete	TITLE	PCD			{	Change	Addition
(MANY)	SE, JOHN E S 2ND ST		NAME STREET ADDRESS		kson, Carl		r.		
STREET ADDITION	SACOLA FL 32507		CITY-ST-ZIP		l Olsen Ro sacola, FI				
TITLE VD	14140 DALDII	☐ Delete	TITLE			·		Change	☐ Addition
600 (	LIAMS, RALPH CHADWICK STREET		NAME						
STREET ADDITION	SACOLA FL 32503		STREET ADDRESS CITY-ST-ZIP						
TITLE VD		☐ Delete	TITLE					Change	☐ Addition
	ORE, BRIAN		NAME.		-				
Omeen nooned	NW OILLILAND RD SACOLA: FL 32507		STREET ADDRESS CITY-ST-ZIP						
TITLE D		□ Delete	TITLE				*.	☐ Change	☐ Addition
NAME DEAR	N, GLENNIS C	. Done	NAME				'		
STREET ADDRESS	B LONGLEAF DR SACOLA:FL 32526		STREET ADDRESS						
· STD			CITY-ST-ZIP						
KYSE	ER, LARRY O	☐ Delete	TITLE					Change	Addition
I NAME	PRINCESS LN		NAME STREET ADDRESS						
CITY-ST-ZIP PENS	SACOLA FL 32526		CITY-ST-ZIP						
TITLE PCD	STEENBERGEN, JOHN F	☐ Delete	TITLE	מ			<u> </u>	Change	Addition
NAME 6115	S N DAVIS HWY APT 85A		NAME		Steenberg		n F.		
I STHEET ADDRESS I	SACOLA FL 32504		STREET ADDRESS CITY-ST-ZIP		5 N, Davis			85A	
G113-21-21P	that the information supplied with	this filing does not qualify for	_4		sacola, FI			v that the i	nformation

Interest certify trial the information supplied with this lifting does not quality for the exemption stated in Section 119.07(3)(1). Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

OF SEGNING OFFICER OR DIRECTOR

Larry O. Kyser

2/4/2004

(850) 457-2771

Daytime Phone #