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NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Feb 18 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #

SIGNATURE:

VIETNAM VETERANS OF SARASOTA-MANATEE, INC.

| Principal Place | of Business | Mailing Address | | | | # 1900) 1885 Oher Langua Bielz enable (ill maarr grass aran) draff dien gran inne | | |
|-------------------|--|---|---------------------------------------|--------|----------------|---|---------------------------------------|--|
| 4411 BEERIDGE | : RD | 4411 BEERIDGE RD | 4411 BEERIDGE RD | | | | | |
| SUITE 403 | - 119 | SUITE 403 | | | | | | |
| SARASOTA FL | 34233 | SARASOTA FL 34233-2514 | | | | 2. Data incorporated or Qualified | 2n Data of Last Banart | |
| U\$ | | US | | | | 3. Date Incorporated or Qualified 03/09/1983 | 3a. Date of Last Report 02/27/1996 | |
| 2. Principal Pl | ace of Business | 2a. Mailing Address | | | | 4. FEI Number 59-2299114 | Applied For Not Applicable | |
| Suite, Apt | #, etc. | Suite, Apt. #, etc. | | | | | 60 7E Additional | |
| 22 | | 27 | · · · · · · · · · · · · · · · · · · · | | | Certificate of Status Desired | Fee Required | |
| City & State | | City & State | | | | Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees | |
| Zip | Country | Zip | Co | untry | | 8. This corporation has liability for in | | |
| 24 | 25 | 29 | 30 | • | | | Yes I No | |
| | 9. Name and Address of Current | Registered Agent | — L Z. Z d | T | | 10. Name and Address of New Regi | Istered Agent | |
| | | | | 81 | Name | | | |
| KUNKEL, DANIEL H. | | | | 82 | Street / | Address (P.O. Box Number is Not Acceptable | <u> </u> | |
| 1710 N. | LAKE SHORE DRIVE | | | | 01,000, | addiess (F.S. Box (tollie) is viol risospiasie | · | |
| SARASC |)TA FL 34231 | | | 63 | | | | |
| | | | | 84 | City | | FL 85 Zip Code | |
| 11. Pursuant t | o the provisions of Sections 617 0502 | and 617,1508, Florida Statu | rtes, the | above | -named | corporation submits this statement for the pu | | |
| office or re | egistered agent, or both, in the State of the familiar with, and accept the obligation | of Florida. Such change was tions of Section 617 0503. F | authoriza Jorida Sta | ed by | the corp | corporation submits this statement for the pu poration's board of directors. I hereby accept | the appointment as registered | |
| | The terminal with a land bosopic trie obligation | | | | | | | |
| SIGNATURE _ | Signature, typod or printed name of registered agen | t and title if applicable. (NC | TE: Register | ed Age | nt elgnature | required when reinstating) | DATE | |
| 12. | OFFICERS AND | | 13 | | | ADDITIONS/CHANGES TO OFFICE | | |
| TITLE | PD | DELETE | 1.1 | TITLE | | | ☐ Change ☐ Addition | |
| NAME | KUNKEL, DANIEL H. | | 1.2 | NAME | | * | | |
| STREET ADDRESS | 1710 N. LAKESHORE DRIVE | | 1.3 | STREET | ADDRESS | | • | |
| DITY-ST-ZIP | SARASOTA FL | | 1.4 | CITY-S | T-ZIP | | | |
| TITLE | VPD | DELETE | 2.1 | TITLE | | | Change Addition | |
| NAME | ANGEL, LARRY | | 2.2 | NAME | | | | |
| STREET ADDRESS | 42238 MACEACHEN BLVD. | | 2.3 | STREET | address | ¥4, | • | |
| City-St-ZiP | SARASOTA FL | | 2.4 | CITY-S | IT-ZIP | | | |
| TITLE | \$ | DELETE | 3.1 | TITLE | | | Change Addition | |
| NAME | FONDACARO, VINCE | | 3.2 | NAME | | | | |
| STREET ADDRESS | 4204 PASADENA CIRCLE | | 3.3 | STREET | ADDRESS | | | |
| CITY-ST-ZIP | SARASOTA PL | | 3.4. | CITY-S | T-ZIP | • | | |
| TITLE | T | ☐ DELETE | | TITLE | | 7 | Change Addition | |
| NAME | POWERS, STEVE | es ^x y | 4, 2 | NAME | | Martin Lebouit | 4 . | |
| STREET ADDRESS | 1780 SPRING GREEK DRIVE | 20141 | 4.3 | STREET | ADDRESS - | Martin Lehowitz 417 N. Briggs A. Saracota, Fl. 3 | ve No 701 | |
| CITY-ST-ZIP | SARASOTA FL | 7/W *** | 1 | CITY-S | T- <i>T</i> IP | Saragota Fl. 3 | 4237 | |
| TITLE | D | DELETE | | TITLE | | | Change Addition | |
| NAME | JEDLINSKY, ROBERT | _ | | NAME | | · · | • | |
| STREET ADDRESS | 4450 LORDS AVENUE S | | | | ADDRESS | | | |
| CITY-ST-ZIP | SARASOTA FL | | - 1 | CITY-S | | | | |
| TITLE | ~- WX 10 W 11 1 1 15 | DELETE | | TITLE | , 611 | | Change Addition | |
| NAME | | | 1 | NAME | | | | |
| | | | | | ADDDECC | | | |
| STREET ADDRESS | | | | | ADDRESS | | | |
| CITY - ST - ZIP | ov gortile that the information are all a | Could thin filling days and and | | CITY-S | | tated in Pastion 110 07/3/// Florida Ptatidas | 1 further earlify that the | |

Information indicated on this fanual report or supplemental annual report is true and accurate a 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 12 or Block 13 if changed, or on an attachment with an address.