

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000000551

**FILED**  
**Jan 08, 2011**  
**Secretary of State**

**Entity Name:** VETERANS DEVELOPMENT CORPORATION, INC.

**Current Principal Place of Business:**

144 LINCOLN STREET  
NORWELL, MA 02061

**New Principal Place of Business:**

**Current Mailing Address:**

50 HUDSON ROAD  
CANTON, MA 02021

**New Mailing Address:**

PO BOX 5357  
NORWELL, MA 02061

**FEI Number:** 20-1750051

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

VONER, VICTOR V  
3521 STERLING STREET  
THE VILLAGES, FL 321627128 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  
Name: VONER, MARK V  
Address: 144 LINCOLN STREET  
City-St-Zip: NORWELL, MA 02061

Title: T  
Name: VONER, VICTOR D  
Address: 3521 STERLING STREET  
City-St-Zip: THE VILLAGES, FL 321627128

Title: S  
Name: FARRELL, JAMES E  
Address: 229 POND STREET  
City-St-Zip: ROCKLAND, MA 02370

Title: D  
Name: VONER, VICTOR D  
Address: 3521 STERLING STREET  
City-St-Zip: THE VILLAGES, FL 321627128

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MARK V. VONER

PRES

01/08/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date