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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F93000000896

1. Corporation Name

USS NEW JERSEY VETERANS, INC.

Principal Place of Business

83 QUEENS WAY
PORT ORANGE FL 32119
US

Mailing Address

83 QUEENS WAY
PORT ORANGE FL 32119
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified

03/04/1993

4. FEI Number
16-1259166

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

MCDOWELL, RICHARD A
83 QUEENS WAY
PORT ORANGE FL 32119

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Richard A. McDowell
Signature, typed or printed name of registered agent and title, if applicable.

Treasurer
(NOTE: Registered Agent signature required when reinstating)

1-20-99
DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE
NAME ESSER, RICHARD
STREET ADDRESS 3930 MEISTER RD
CITY-ST-ZIP LORAIN OH 44053

TITLE D ☐ DELETE
NAME ELWOOD, GEORGE H
STREET ADDRESS 10 WEST MAIN ST.
CITY-ST-ZIP HANCOCK NY 13783

TITLE CD ☐ DELETE
NAME MARTIN, JAMES C
STREET ADDRESS 501-F WATERS EDGE DR.
CITY-ST-ZIP NEWPORT NEWS VA 23606

TITLE TD ☐ DELETE
NAME MCDOWELL, RICHARD A
STREET ADDRESS 83 QUEENS WAY
CITY-ST-ZIP PORT ORANGE FL 32119

TITLE D ☐ DELETE
NAME O'NEILL, FRANK L
STREET ADDRESS 7723 LEGION RD HWY
CITY-ST-ZIP VENTRESS LA

TITLE VPD ☐ DELETE
NAME KALAKAUSKIS, LAWRENCE
STREET ADDRESS 6160 ROBERTS DR.
CITY-ST-ZIP SAN DIEGO CA 92139

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Richard A. McDowell
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan 20, 1999 *1-904-756-1144*
Date Daytime Phone #

CR2E037 (1/98)