

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000004842

Entity Name: UNION VETERANS UNION, INC.

FILED  
Apr 21, 2004  
Secretary of State

## Current Principal Place of Business:

333 W. OCEAN AVE.  
LANTANA, FL 334622861

## New Principal Place of Business:

## Current Mailing Address:

333 W. OCEAN AVE.  
LANTANA, FL 334622861

## New Mailing Address:

FEI Number: 65-1125168

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BAIR, RONALD L  
333 W. OCEAN AVE.  
LANTANA, FL 334622861

## 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: PD ( ) Delete  
Name: BAIR, RONALD L  
Address: 333 W. OCEAN AVE.  
City-St-Zip: LANTANA, FL 334622861

Title: STD ( ) Delete  
Name: LEATHERMAN, MARY J  
Address: 1815 S CLUB DR  
City-St-Zip: WEST PALM BEACH, FL 33414

Title: D ( ) Delete  
Name: BAIR, GUY D  
Address: 10937 NW 33RD PLACE  
City-St-Zip: GAINESVILLE, FL 32606

Title: D ( ) Delete  
Name: BAIR, JONAS L  
Address: 333 W. OCEAN AVE.  
City-St-Zip: LANTANA, FL 334622861

Title: D ( ) Delete  
Name: BAIR, SANDRA A  
Address: 333 W. OCEAN AVE.  
City-St-Zip: LANTANA, FL 334622861

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: RONALD L. BAIR

PD

04/21/2004

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

\_\_\_\_\_  
Date