

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 18, 2008 08:00 AM
Secretary of State

DOCUMENT # N0200000233

1. Entity Name

VERONICA SHOEMAKER'S CHARITY SERVICES, INC.



Principal Place of Business

3054 MANGO ST
FT MYERS FL 33916

Mailing Address

3054 MANGO ST
FT MYERS FL 33916



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/07)

4. FEI Number
30-0078142

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SHOEMAKER, VERONICA
3054 MANGO ST
FT MYERS FL 33916

Name

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

City

FL

Zip Code

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 the obligations of registered agent

SIGNATURE

Veronica D. Shoemaker

Signature, typed or printed name of registered agent and Title (if applicable)

(NOTE: Registered Agent signature required when re-registering)

3/20/2008

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	SHOEMAKER, VERONICA	
STREET ADDRESS	3054 MANGO ST	
CITY- ST- ZIP	FT MYERS FL 33916	
TITLE	SD	<input type="checkbox"/> Delete
NAME	KINNIE, SHERRY	
STREET ADDRESS	6 W CLERMONT ST	
CITY- ST- ZIP	FT MYERS FL 33916	
TITLE	TD	<input type="checkbox"/> Delete
NAME	SAPP, RICHARD	
STREET ADDRESS	3275 SOUTH ST	
CITY- ST- ZIP	FT MYERS FL 33916	
TITLE	D	<input type="checkbox"/> Delete
NAME	WEEMS, LARRY	
STREET ADDRESS	3510 DR MARTIN LUTHER KING JR BLVD	
CITY- ST- ZIP	FT MYERS FL 33916	
TITLE	D	<input type="checkbox"/> Delete
NAME	YOUNG, MATTIE S	
STREET ADDRESS	1540 LOCKWOOD ST	
CITY- ST- ZIP	FORT MYERS FL 33916	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	U000000906874	
STREET ADDRESS	05/05/08-80015-023 61.25	
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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.

SIGNATURE:

Richard R. Sapp, Jr.

4/14/08

239-332-1802