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Apr 17 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N02508 (2)

1. Corporation Name

VIETNAM VETERAN'S OF NORTH FLORIDA, INC.



Principal Place of Business

Mailing Address

7547 OLD PLANK RD
JACKSONVILLE FL 32220

7547 OLD PLANK RD
JACKSONVILLE FL 32220-2714

3. Date Incorporated or Qualified
04/12/1984

3a. Date of Last Report
01/09/1997

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 8173 Sutton Place N

22 City & State

27 City & State
Jacksonville Florida

23 Zip Country

28 Zip Country
32257 Duval

4. FEI Number
06-9389509

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

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WILDER, WILLIAM
7547 OLD PLANK RD
JACKSONVILLE FL 32220

81 Name

GURU STEVENS

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

217 BERNARD STREET

83

84 City

Jacksonville

FL

85 Zip Code
32210

11. Pursuant to the provisions of Sections 617.0503 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

[Signature]
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ADMD ☒ DELETE
NAME MCLEMORE, MIKE
STREET ADDRESS 4606 PALMER AVE
CITY-ST-ZIP JACKSONVILLE FL 32236

1.1 TITLE ADMD ☒ Change ☐ Addition
1.2 NAME STEVENS, GURU GURU STEVENS
1.3 STREET ADDRESS 217 BERNARD STREET
1.4 CITY-ST-ZIP JACKSONVILLE FL 32210

TITLE OCD ☒ DELETE
NAME WILDER, BILL
STREET ADDRESS 7547 OLD PLANK RD
CITY-ST-ZIP JACKSONVILLE FL 32220

2.1 TITLE OCD ☒ Change ☐ Addition
2.2 NAME CLARK BLACKMAN
2.3 STREET ADDRESS PO Box 26431
2.4 CITY-ST-ZIP JACKSONVILLE FL 32218

TITLE TD ☒ DELETE
NAME CARRICO, JAMES
STREET ADDRESS 2816 LAUDERDALE DR E.
CITY-ST-ZIP JACKSONVILLE FL 32277

3.1 TITLE TD ☒ Change ☐ Addition
3.2 NAME M.O. HINDAL
3.3 STREET ADDRESS 8173 SUTTON PLACE N.
3.4 CITY-ST-ZIP JACKSONVILLE FL 32257

TITLE TD ☒ DELETE
NAME BEDSOLE, J.C.
STREET ADDRESS 2816 LAUDERDALE DR. E.
CITY-ST-ZIP JACKSONVILLE FL 32277

4.1 TITLE D ☒ Change ☐ Addition
4.2 NAME MICHAEL MINOR
4.3 STREET ADDRESS 10720 LUANA DRIVE N
4.4 CITY-ST-ZIP JACKSONVILLE FL 32246-2431

TITLE D ☒ DELETE
NAME MONCRIEF, JOSH
STREET ADDRESS 7547 OLD PLANK RD
CITY-ST-ZIP JACKSONVILLE FL 32277

5.1 TITLE D ☒ Change ☐ Addition
5.2 NAME WILLIAM WILDER
5.3 STREET ADDRESS 7547 OLD PLANK RD
5.4 CITY-ST-ZIP JACKSONVILLE FL 32220

TITLE D ☒ DELETE
NAME WEST, DAVID
STREET ADDRESS 7509 OLD PLANK RD
CITY-ST-ZIP JACKSONVILLE FL 32220

6.1 TITLE D ☒ Change ☐ Addition
6.2 NAME MIKE MCLEMORE
6.3 STREET ADDRESS 4606 PALMER AVE
6.4 CITY-ST-ZIP JACKSONVILLE FL 32236

14. I do 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.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 9999999

CR2E037 (9/96)