

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N02508

FILED
Sep 13, 2002
Secretary of State

Entity Name: VIETNAM VETERAN'S OF NORTH FLORIDA, INC.

Current Principal Place of Business:

7547 OLD PLANK RD.
JACKSONVILLE, FL 32220 US

New Principal Place of Business:

Current Mailing Address:

7547 OLD PLANK RD.
JACKSONVILLE, FL 32220 US

New Mailing Address:

FEI Number: 06-9389509

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WILDER, WILLIAM
7547 OLD PLANK RD.
JACKSONVILLE, FL 32220 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: ACD () Delete
Name: MCCEMOKE, DAVID M
Address: 141 OLD ORANGE PARK RD. APT 230
City-St-Zip: ORANGE PARK, FL 320733032

Title: OCD () Delete
Name: WILDER, BILL
Address: 7547 OLD PLANK RD.
City-St-Zip: JACKSONVILLE, FL 32220

Title: SD () Delete
Name: ZIEMINSKI, SUE
Address: 141 OLD ORANGE PARK RD., APT 230
City-St-Zip: ORANGE PARK, FL 320733032

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ACD (X) Change () Addition
Name: MCLEMORE, DAVID M
Address: 141 OLD ORANGE PARK RD. APT 230
City-St-Zip: ORANGE PARK, FL 32073

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

Title: SD (X) Change () Addition
Name: ZIEMINSKI, SUE
Address: 141 OLD ORANGE PARK RD., APT 230
City-St-Zip: ORANGE PARK, FL 32073

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: WILLIAM WILDER

OCD

09/13/2002

Electronic Signature of Signing Officer or Director

Date