

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008078

**FILED**  
**Apr 27, 2011**  
**Secretary of State**

**Entity Name:** PANAMANIAN VETERANS ASSOCIATION OF FLORIDA, INC.

**Current Principal Place of Business:**

17342 NW 62ND CT.  
HIALEAH, FL 33015

**New Principal Place of Business:**

**Current Mailing Address:**

17342 NW 62ND CT.  
HIALEAH, FL 33015

**New Mailing Address:**

**FEI Number:** 02-0774748

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SAVOURY, JOSE A  
9033 S.W. 20TH PLACE  
MIRAMAR, FL 33025 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: PD  
Name: BROWN, BUSTER  
Address: 4465 NW 207 DR.  
City-St-Zip: OPA LOCKA, FL 33055

Title: VD  
Name: BROWN, RICARDO  
Address: 7055 NW 1079 ST APT 107  
City-St-Zip: HIALEAH, FL 33015

Title: SD  
Name: SAVOURY, JOSE A  
Address: 9033 S.W. 20TH PL  
City-St-Zip: MIRAMAR, FL 33025

Title: TD  
Name: CUMBERBATCH, RICARDO E  
Address: 17342 NW 62ND CT.  
City-St-Zip: HIALEAH, FL 33015

Title: A/TD  
Name: WHITTINHAM, ROBERTO S  
Address: 19032 NW 79CT  
City-St-Zip: HIALEAH, FL 33015

Title: A/SD  
Name: ESCOBAR, GUILLERMO  
Address: 171 E 60TH ST  
City-St-Zip: HIALEAH, FL 33013

I hereby 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 all other like empowered.

SIGNATURE: BUSTER BROWN

PD

04/27/2011

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

\_\_\_\_\_  
Date