

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000005894

**FILED**  
**Mar 21, 2011**  
**Secretary of State**

**Entity Name:** THE HONORABLE DISCHARGED VETERANS OF SARASOTA COUNTY, INC.

**Current Principal Place of Business:**

2445 FRUITVILLE ROAD  
SARASOTA, FL 34237

**New Principal Place of Business:**

**Current Mailing Address:**

2445 FRUITVILLE ROAD  
SARASOTA, FL 34237

**New Mailing Address:**

**FEI Number:** 20-4983482

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ALLEN, VELMA  
2445 FRUITVILLE ROAD  
SARASOTA, FL 34237 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: P  
Name: ALLEN, VELMA  
Address: 2445 FRUITVILLE ROAD  
City-St-Zip: SARASOTA, FL 34237

Title: S  
Name: WEILAND, KIM  
Address: 2445 FRUITVILLE ROAD  
City-St-Zip: SARASOTA, FL 34237

Title: VP  
Name: WETZEL, EVELYN  
Address: 2445 FRUITVILLE RD.  
City-St-Zip: SARASOTA, FL 34237

Title: T  
Name: ALLEN, JOHN  
Address: 2445 FRUITVILLE ROAD  
City-St-Zip: SARASOTA, FL 34237

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:** VELMA ALLEN

P

03/21/2011

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

\_\_\_\_\_  
Date