## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N07000007895

FILED Jan 13, 2009 Secretary of State

Entity Name: FLORIDA VETERANS FOR COMMON SENSE, INC.

Current Principal Place of Business:

New Principal Place of Business:

100 WALLACE AVENUE

STE.255

Current Mailing Address: New Mailing Address:

100 WALLACE AVENUE STE.255 SARASOTA, FL 34237

SARASOTA, FL 34237

FEI Number: 26-0804968 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

JONES, C EUGENE

356 ISLAND CIRCLE

SARASOTA, FL 34242 US

JONES, EUGENE

356 ISLAND CIRCLE

SARASOTA, FL 34242 US

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: EUGENE JONES 01/13/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete Title: ( ) Change ( ) Addition Name: JONES, EUGENE C Name:

 Name:
 JONES, EUGENE C
 Name:

 Address:
 356 ISLAND CIRCLE
 Address:

 City-St-Zip:
 SARASOTA, FL 34242 US
 City-St-Zip:

Title: VP ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 BURNS, MICHAEL T
 Name:

 Address:
 100 WALLACE AVE. STE. 255
 Address:

 City-St-Zip:
 SARASOTA, FL 34242 US
 City-St-Zip:

Title: TREA () Delete Title: TREA (X) Change () Addition

 Name:
 KOSS, JULIAN
 Name:
 DENNIS, PLEWS

 Address:
 4180 VIA MIRADA
 Address:
 27 FLETCHER AVE

 City-St-Zip:
 SARASOTA, FL
 34237

Title: SEC ( ) Delete Title: SEC (X) Change ( ) Addition

Name:GOCHBERG, HARVEYName:GOCHBERG, HARVEYAddress:4770 RINGWOOD MEADOWAddress:4770 RINGWOOD MEADOWCity-St-Zip:SARASOTA, FL USCity-St-Zip:SARASOTA, FL 34235 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: EUGENE JONES PRES 01/13/2009