2001 UNIFORM BUSINESS REPORT (UBR) FILED Jan 29, 2001 8:00 am Secretary of State DOCUMENT # **N07653** 1. Entity Name VIETNAM VETERANS OF AMERICA CHAPTER 127, INC., M 01-29-2001 90074 018 ****61 25 Principal Place of Business Mailing Address 5607 PALMETTO 5607 PALMETTO FT PIERCE FL 34982 FT PIERCE FL 34982 US 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 13-3030278 Not Applicable Zip Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) HUDSON, BRUCE D 5607 PALMETTO DR PALMETTO DR-FT PIERCE FL 34482 IERCE 8. 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. BRUCE D - HWOSON (NOTE: Registered Agent signature required when reinstating) Make Check Payable to 9. Election Campaign Financing FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. PD PD Change ☐ Addition Delete TITLE TITLE THOMAS F. MANNIN 2117 SW IMPORT DR MARTIN, DAVID F NAME NAME STREET ADDRESS STREET ADDRESS 2245 OAK RIDGE ROAD CITY-ST-ZIP PORT SAINT LUCIE CITY-ST-7IP PALM CITY FL 34990 VĎ VD Delete TITLE TITLE DARYL HENRY 1166 NW 13TH TERR SUNDHEIN, FREDERICK G JR NAME NAME STREET ADDRESS STREET ADDRESS 47:SW RIVERWAY BLVD CITY-ST-ZIP CITY-ST-ZIP PALM CITY FL 34990 TITL'F Delete-STEVEN F. VAROLI VAROLI, STEVEN F NAME NAME 3133 BERRY AVE STREET ADDRESS STREET ADDRESS 3133 BERRY AVENUE 34990 CITY-ST-ZIP PALM CITY CITY-ST-ZIP PALM CITY FL 34990 ☐ Addition 🗹 Delete TITLE TITI F RODNEY S EARLY 7008 SE CUTLER TRL GAUL, JOHN B NAME NAME STREET ADDRESS STREET ADDRESS **6713 SW LASSOO LN** STUART 34997 CITY-ST-ZIP PALM CITY FL 34990 CITY-ST-ZIP TITLE ☐ Change ☐ Addition ☐ Delete TITLE BRUCE D. HUDSON 5607 PALMETTO DR HUDSON, BRUCE D NAME NAME STREET ADDRESS STREET ADDRESS 5607 PALMETTO DRIVE PIERCE CITY-ST-ZIP CITY-ST-ZIP FT PIERCE FL 34982 ☐ Addition ☐ Change Delete TITLE NAME NAME

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

BRUCE D. HUDSON 1-5-01 + 465-5777