2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000002841

FILED Jaņ 1<u>9, 2</u>009 Secretary of State

Entity Name: VIETNAM VETERANS OF AMERICA, CHAPTER #1003, INC.

Current Principal Place of Business: New Principal Place of Business:

13129 COLONY RD 9734 DICK ST. HUDSON, FL 34669 HUDSON, FL 34669

Current Mailing Address: New Mailing Address:

PO BOX 7003 HUDSON, FL 34674

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X)

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

BARLOW, LOUIS M 12535 GUMEE AVE NEW PORT RICHEY, FL 34654

OFFICERS AND DIRECTORS:

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

HOLDREN, HAROLD W WILLIAM, COFFEY P Name: Name: PO BOX 5632 Address: 7516 CLANTON TRL Address: City-St-Zip: HUDSON, FL 34674 City-St-Zip: HUDSON, FL 34667

Title: Title: (X) Change () Addition () Delete Name: MOBBS, GARY Name: ROSEMARY, CIANCIOSI T Address: 14535 LITTLE RANCH RD Address: 11825 FAITHFUL WAY APT.203 City-St-Zip: SHADY HILLS, FL 34610 City-St-Zip: NEW PORT RICHEY, FL 34653

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

REGA, VINCENT Name: Name: 8340 HIGH POINT CIRCLE Address: Address: City-St-Zip: PORT RICHEY, FL 34668 City-St-Zip:

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

Name: MCDONALD, STEVE Name: WILLIAM, KAEMPF R 12769 CIRCLE LAKE DR. Address: 9831 OSECOLA DR Address: City-St-Zip: NEW PORT RICHEY, FL 34654 City-St-Zip: HUDSON, FL 34669

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: WILLIAM R KAEMPF Т 01/19/2009