

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000004568

FILED
Jan 13, 2009
Secretary of State

Entity Name: FLORIDA VETERANS PROGRAMS & PROJECTS, INC.

Current Principal Place of Business:

4905 LOS ALTOS CIRCLE
ELKTON, FL 32033 US

New Principal Place of Business:

Current Mailing Address:

4905 LOS ALTOS CIRCLE
ELKTON, FL 32033 US

New Mailing Address:

FEI Number: 36-4632252 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ROTHFELD, MICHAEL
4905 LOS ALTOS CIRCLE
ELKTON, FL 32033 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 () Delete
Name: ROTHFELD, MICHAEL
Address: 4905 LOS ALTOS CIRCLE
City-St-Zip: ELKTON, FL 32033 US

Title: VP () Delete
Name: ISAM, MICHAEL T
Address: 620 QUEEN ROAD
City-St-Zip: ST. AUGUSTINE, FL 32086 US

Title: S/T () Delete
Name: NAPPER, WILLIAM
Address: 4936 LOS ALTOS CIRCLE
City-St-Zip: ELKTON, FL 32033 US

Title: D () Delete
Name: KIDWELL, EARL
Address: 5317 MARBELLA PLACE
City-St-Zip: ELKTON, FL 32033 US

Title: D () Delete
Name: ERNISSEE, JACK
Address: 4878 COQUINA CROSSING DRIVE
City-St-Zip: ELKTON, FL 32033 US

Title: D () Delete
Name: WORSHAM, PATRICIA
Address: 4890 COQUINA CROSSING DRIVE
City-St-Zip: ELKTON, FL 32033 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/T (X) Change () Addition
Name: ROTHFELD, MICHAEL
Address: 4905 LOS ALTOS CIRCLE
City-St-Zip: ELKTON, FL 32033 US

Title: VP (X) Change () Addition
Name: ERNISSEE, JACK
Address: 4878 COQUINA CROSSING DRIVE
City-St-Zip: ELKTON, FL 32033 US

Title: SECY (X) Change () Addition
Name: MANFORD, HARRY
Address: 5221 BASCO COURT
City-St-Zip: ELKTON, FL 32033 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: VANAIRSDALE, JAMES
Address: 62 WILLOW DRIVE
City-St-Zip: ST. AUGUSTINE, FL 32080 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MICHAEL ROTHFELD

Electronic Signature of Signing Officer or Director

PRES

01/13/2009

Date