

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09196

FILED  
Mar 10, 2009  
Secretary of State

**Entity Name:** VIETNAM VETERANS OF FLORIDA FOUNDATION, INC.

**Current Principal Place of Business:**

4905 SECLUDED WAY  
MERRITT ISLAND, FL 32953 US

**New Principal Place of Business:**

1226 WING ROAD SW  
PALM BAY, FL 32908 US

**Current Mailing Address:**

4905 SECLUDED WAY  
MERRITT ISLAND, FL 32953 US

**New Mailing Address:**

1226 WING ROAD SW  
PALM BAY, FL 32908 US

**FEI Number:** 59-2904226

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MCDONOUGH, WAYNE R.  
1901 25TH STREET  
VERO BEACH, FL 32960 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: DVP ( ) Delete  
Name: NEITZEL, BOB  
Address: 2304 WOODLAND DR  
City-St-Zip: EDGEWATER, FL 32141 US

Title: DP ( ) Delete  
Name: WASSMER, DON  
Address: 1226 WING RD SW  
City-St-Zip: PALM BAY, FL 32908

Title: DT ( ) Delete  
Name: EARRUSSO, JACQUE  
Address: 4905 SECLUDED WAY  
City-St-Zip: MERRITT ISLAND, FL 32953

Title: DS ( ) Delete  
Name: WASSMER, DENISE  
Address: 1226 WING RD SW  
City-St-Zip: PALM BAY, FL 32908 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

Title: PPD ( ) Change (X) Addition  
Name: BAKER, KEN  
Address: 1509 TATE STREET  
City-St-Zip: COCOA, FL 32922 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: KEN BAKER

PPD

03/10/2009

Electronic Signature of Signing Officer or Director

Date