

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000011890

FILED
May 01, 2012
Secretary of State

Entity Name: VETERAN ASSISTANCE ORGANIZATION INC.

Current Principal Place of Business:

125 S ORCHARD ST #202
202
ORMOND BEACH, FL 32174

New Principal Place of Business:

Current Mailing Address:

125 S ORCHARD ST #202
202
ORMOND BEACH, FL 32174

New Mailing Address:

FEI Number: 27-4447746

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.
13302 WINDING OAKS BLVD SUITE A
TAMPA, FL 33612 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: PD
Name: SELBY, ADAM
Address: 125 S ORCHARD ST #202
City-St-Zip: ORMOND BEACH, FL 32174

Title: SD
Name: WEBBER, PAUL
Address: 5806 PETUNIA LN.
City-St-Zip: ORLANDO, FL 32821

Title: TD
Name: ROBINSON, KATIE
Address: 245 S. AMELIA ST
City-St-Zip: DELAND, FL 34720

Title: D
Name: MOORE, SCOTT
Address: 1290 9TH ST
City-St-Zip: HOLLY HILL, FL 32117

Title: D
Name: DICKERS, GAYME
Address: 511 SEAGRAVE ST. APT. 1
City-St-Zip: DAYTONA, FL 32114

Title: D
Name: NOTARANTONIO, ROBERTO
Address: 125 DELTONA BLVD.
City-St-Zip: DELTONA, FL 32715

I hereby 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 all other like empowered.

SIGNATURE: ADAM SELBY

P

05/01/2012

Electronic Signature of Signing Officer or Director

_____ Date