## N19288

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Special Instructions to I	Filing Officer:	
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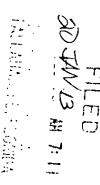
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JAN 1 4 2020 S. YOUNG



December 18, 2019

JIM ROMANEK PO BOX 1354 VERO BEACH, FL 32961

SUBJECT: VETERANS COUNCIL OF INDIAN RIVER COUNTY,

INCORPORATED. Ref. Number: N19288

We have received your document for VETERANS COUNCIL OF INDIAN RIVER COUNTY, INCORPORATED. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Amendments for nonprofit corporations are filed in compliance with section 617.1006, Florida Statutes. Please see the attached information.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Shelia H Young Regulatory Specialist II

www.sunbiz.org

D O D O V 000 E M II I D I I 000 .

Letter Number: 719A00025756

## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CO	RPORATI	VETERANS COUNDN:			R COUNTY	, INC.
DOCUMENT	NUMBER:	N19288				
The enclosed A	rticles of An	nendment and fee are sub	mitted for filing.			
Please return all	l correspond	ence concerning this matt	er to the following:			
JIM ROMANE	K					
	<u> </u>		(Name of Contact	Perso	n)	
VETERANS C	OUNCIL O	F INDIAN RIVER COU	NTY, INC.			
			(Firm/ Compa	ny)		
PO BOX 1354						
			(Address)			
VERO BEACE	H, FL 32961					
		**	(City/ State and Zi	p Cod	le)	
ЛМ@VETERA	ANSCOUNC	CILIRC.ORG				
		-mail address: (to be use	d for future annual i	eport	notification	n)
For further info	rmation con	cerning this matter, please	e call:			
PATRICIA GE	EYER			at		
		(Name of Contact Person	1)	(A	rea Code)	(Daytime Telephone Number)
Enclosed is a ch	neck for the	following amount made p	ayable to the Florid	a Dep	artment of	State:
■ \$35	Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing For Certified Copy (Additional copy enclosed)		Certifi Certifi	Diffing Fee leate of Status led Copy tional Copy is sed)
10 S 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Amendmo Division of P.O. Box	ent Section of Corporations	]    -	Amen Divisi The C 2415		orations allahassee e Street, Suite 810

## Articles of Amendment to Articles of Incorporation of

VETERANS COUNCIL OF INDIAN RIVER COUNTY, INCORPORATED

(Name of Corporation as currently filed with the	e Florida D	Dent. of State)		
N19288		,		
	nent Numb	er of Corporation (if kn	own)	
Pursuant to the provisions of section 617.1006, Flo amendment(s) to its Articles of Incorporation:	rida Statute	es, this <i>Florida Not Fo</i> r	r Profit Corporation adop	ts the following
A. If amending name, enter the new name of th	e corporati	ion:		
N/A				The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam		tion" or "incorporated	" or the abbreviation "Co	rp." or "Inc."
B. Enter new principal office address, if applica				<del> </del>
(Principal office address <u>MUST BE A STREET A</u>	IDDKESS .	) N/A		<u> </u>
C. Enter new mailing address, if applicable:	DOV)	N/A		
(Mailing address MAY BE A POST OFFICE	<u>BOX</u> )			- H-
			<u> </u>	$\frac{1}{2}$
D. If amending the registered agent and/or regi	stered offic	ce address in Florida,	enter the name of the	1
new registered agent and/or the new register				7:
Name of New Registered Agent:	Martin J.	Zickert	· <del>-</del> -	· · · · · · · · · · · · · · · · · · ·
	2525 St. I	Lucie Ave.		
N D : 4 1000 All		(Fle	orida street address)	
New Registered Office Address:	: Vero Bea	ch	32	960
		(City)	, Florida <u></u> (Zip Code	
		(Ciù)	(29) Com	49
New Registered Agent's Signature, if changing I hereby accept the appointment as registered ager	Registered	Agent:	the obligations of the nosi	tion
тистему иссерь те арропитет из геделегей идег	i ain jai	Le l'e	7	
		nto 1/	heer	
	Si	ignature of New Registo	ered Agent, if changing	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation. Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change X Remove X Add	PT         John Do           V         Mike Jo           SV         Sally Sr	nes	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) × Change Add	D	KOUNS, SAM	
Remove		-	
2) Change Add		YOUNG, ANTHONY	
X Remove 3) Change Add X Remove	<u>s</u>	PILGER, KIM G	
4) × Change Add	CHAIR	ZICKERT, MARTIN J	
Remove			
5) × Change Add	<u>T</u>	DALE, KEN	
Remove			
6) X Change Add	D	OATES, CARROLL	
		Page 2 of 4 cles, enter change(s) here:	
(attach additional shee	ts, if necessary).	(Be specific)	
N/A			
		1.5	
	· · · · · · · · · · · · · · · · · · ·		<del></del>

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

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Example: $\underline{X}$ Change $\underline{X}$ Remove $\underline{X}$ Add		Doe : Jones : Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	JUDGE	ROBERTS, DILLON	
Add X Remove			
2) Change	S	HALCOMB, CARLOS	2525 ST. LUCIE AVE
X Add			VERO BEACH, FL 32960
Remove 3 ) Change	D	CADY, BRUCE	2525 ST. LUCIE AVE
X Add			VERO BEACH, FL 32960
Remove  4) Change	D	MOSS, LAURA	2525 ST. LUCIE AVE
X Add			VERO BEACH, FL 32960
Remove	n	NEWHART, DAVE	
5) X Change	<u>D</u>	NEWHAKI, DAVL	
Remove			
6) X Change	VICE-C	HOLDEN, CURTIS	
Add			
Remove		Δ	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

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Example:	•		
X Change X Remove X Add	<u>V</u> <u>Mik</u>	<u>n Doe</u> <u>e Jones</u> y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add	D	ZUDANS, TRACY	2525 ST. LUCIE AVE. VERO BEACH, FL 32960
Remove			
2) Change Add	<u>D</u>	RYAN, PATTY	2525 ST. LUCIE AVE VERO BEACH, FL 32960
Remove 3 ) Change Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove	dina additional	Page 2 of 4  Articles, enter change(s) here:	
(attach additional sh			

	<del></del>
	<del></del> _
	<del></del>
Page 3 of 4	
The date of each amendment(s) adoption:  DECEMBER 18, 2019	_, if other than the
date this document was signed.	
DECEMBER 18, 2019	
Effective date if applicable: (no more than 90 days after amendment file date)	
	ha limad as the
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not document's effective date on the Department of State's records.	be usted as me
document 5 enective date on the Department of State 5 records.	
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the members and the number of votes east for the amendment(s)	
The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	

Dated	DECEMBER 18, 2019
Signatur	(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	MARTIN J ZICKERT
	(Typed or printed name of person signing)
	CHAIRMANLOF THE BOARD OF DIRECTORS
	(Title of person signing)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were

adopted by the board of directors.