

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N39095

FILED
Sep 10, 2009
Secretary of State

Entity Name: SOUTH FLORIDA VETERANS MULTI-PURPOSE CENTER, INC.

Current Principal Place of Business:

4252 SW 64TH AVE
FORT LAUDERDALE, FL 33314 US

New Principal Place of Business:

4311 SW 63RD AVE
DAVIE, FL 33314 US

Current Mailing Address:

4252 SW 64TH AVE
FORT LAUDERDALE, FL 33314 US

New Mailing Address:

4311 SW 63RD AVE
DAVIE, FL 33314 US

FEI Number: 65-0205276 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BAMBURY, ROBERT J.
13841 SW 36TH COURT
DAVIE, FL 333301505 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: D () Delete
Name: BAMBURY, ROBERT J.
Address: 13841 S.W. 36TH COURT
City-St-Zip: DAVIE, FL 33330 US

Title: D () Delete
Name: TRACY, TORELLI
Address: 4252 SW 64TH AVE
City-St-Zip: FORT LAUDERDALE, FL 33314 US

Title: D () Delete
Name: MARGE, BAMBURY
Address: 4252 SW 64TH AVE
City-St-Zip: FORT LAUDERDALE, FL 33314 US

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:

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: ROBERT J. BAMBURY

PRES

09/10/2009

Electronic Signature of Signing Officer or Director

Date