

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N42935

1. Entity Name

VIETNAM VETERANS OF AMERICA, INC. CHAPTER #562 D
ADE CITY, FLORIDA

Principal Place of Business

6214 CEDAR GLEN DRIVE
WESLEY CHAPEL FL 33544

Mailing Address

6214 CEDAR GLEN DRIVE
WESLEY CHAPEL FL 33544

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3045404

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LAMBERT, THOMAS
39040 S. AVENUE
ZEPHYRHILLS FL 33540

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
NAME BEECHER, GERRY
STREET ADDRESS 14615 SCHARBER ROAD
CITY-ST-ZIP DADE CITY FL 33525

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VD ☐ Delete
NAME JONES, CHARLES
STREET ADDRESS 35040 PROSPECT RD
CITY-ST-ZIP DADE CITY FL 33525

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE STD ☐ Delete
NAME EDDINGS, ROBERT L
STREET ADDRESS 6214 CEDAR GLEN DRIVE
CITY-ST-ZIP WESLEY CHAPEL FL 33544

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE CD ☐ Delete
NAME LAMBERT, THOMAS
STREET ADDRESS 39040 S AVE
CITY-ST-ZIP SPRING HILL FL 33540

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE STD ☐ Delete
NAME EDDINGS, ROBERT L
STREET ADDRESS 6214 CEDAR GLEN DR
CITY-ST-ZIP WESLEY CHAPEL FL 33544

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE CD ☐ Delete
NAME POPPY, TOM
STREET ADDRESS 12810 LINDEN DR
CITY-ST-ZIP SPRING HILL FL 34609

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Robert L Eddings
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Robert L Eddings - 5-10-2002

Date

Day, Month, Year



DO NOT WRITE IN THIS SPACE

CR2E037 (9/01)