

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N45546

1. Entity Name

VETERANS OF THE VIETNAM WAR FLORIDA POST 4 INC.

Principal Place of Business

Mailing Address

P.O. BOX 5346
HOLLYWOOD FL 33083

P.O. BOX 5346
HOLLYWOOD FL 33083

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

65-0077124

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

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
After September 12, 2001, min. will be \$236.25

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
NAME CARREIRO, NORMAN
STREET ADDRESS 4120 SW 31ST DRIVE
CITY-ST-ZIP HOLLYWOOD FL
☐ Delete

TITLE PP
NAME NORMAN CARREIRO
STREET ADDRESS 4120 SW 31ST
CITY-ST-ZIP HOLLYWOOD FL 33023
☐ Change ☐ Addition

TITLE VD
NAME BROWNELL, HENRY
STREET ADDRESS 6748 SW 33RD PL
CITY-ST-ZIP DAVIE FL 33314
☒ Delete
ADDRESS

TITLE VD
NAME HENRY BROWNELL
STREET ADDRESS 43 OKOMO DR W.
CITY-ST-ZIP HOLLYWOOD FL 33021
☐ Change ☒ Addition

TITLE PD
NAME CARREIRO, NORMAN J.
STREET ADDRESS 4120 SW 31ST DR
CITY-ST-ZIP HOLLYWOOD FL 33023
☐ Delete

TITLE PP
NAME NORMAN CARREIRO
STREET ADDRESS 4120 SW 31ST
CITY-ST-ZIP HOLLYWOOD FL 33023
☐ Change ☐ Addition

TITLE STD
NAME MAST, HUGO O.
STREET ADDRESS 1510 LEE ST
CITY-ST-ZIP HOLLYWOOD FL 33020
☐ Delete

TITLE PP
NAME HUGO O. MAST
STREET ADDRESS 1510 LEE ST
CITY-ST-ZIP HOLLYWOOD FL 33020
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

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: SIGNATURE REQUIRED

FILED
Aug 31, 2001 8:00 am
Secretary of State

08-31-2001 90001 013 ****61.25

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DO NOT WRITE IN THIS SPACE

CR2E037 (5/01)