

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 23, 2002 8:00 am
Secretary of State

05-23-2002 90115 029 ****61.25

DOCUMENT # N49722

1. Entity Name

VERO BEACH VETERANS, INC.

Principal Place of Business

Mailing Address

**2500 15TH AVENUE
 VERO BEACH FL 32960**

**2500 15TH AVENUE
 VERO BEACH FL 32960**

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

59-0599182

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

**SHORKEY, BERNARD A
 780 17TH AVE
 VERO BEACH FL 32962**

Robert Paz - Pres.

Name **Robert Paz**
 Street Address (P.O. Box Number is Not Acceptable)
1265 35th Ave

City **Vero Bch** FL Zip Code **32960**

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

(NOTE: Registered Agent signature required when reinstating)

DATE **4/28/02**

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 **VP** ☐ Delete
 NAME **MAEGLIN, JERRY D**
 STREET ADDRESS **3465 1ST ST**
 CITY-ST-ZIP **VERO BEACH FL 32968**

TITLE **Gary Mills** ☐ Change ☐ Addition
 NAME **2106 30th Ave**
 STREET ADDRESS **1st Vice**
 CITY-ST-ZIP **Vero Bch FL 32960**

TITLE **S** ☐ Delete
 NAME **HOSFORD, MIKE**
 STREET ADDRESS **770 MIRACLE MILE**
 CITY-ST-ZIP **VERO BEACH FL 32960**

TITLE **Ray Bagdy** ☒ Change ☐ Addition
 NAME **51 Woodland Dr #101**
 STREET ADDRESS **2nd Vice**
 CITY-ST-ZIP **Vero Bch FL 32962**

TITLE **BMD** ☐ Delete
 NAME **BROWN, BILL**
 STREET ADDRESS **2176 31ST AVE**
 CITY-ST-ZIP **VERO BEACH FL 32960**

TITLE **William Duprey** ☒ Change ☐ Addition
 NAME **1740 46th Ave**
 STREET ADDRESS **Treasur**
 CITY-ST-ZIP **Vero Bch FL 32966**

TITLE **BMD** ☐ Delete
 NAME **HULMES, THOMAS**
 STREET ADDRESS **155 20TH AVENUE**
 CITY-ST-ZIP **VERO BEACH FL 32962**
Trustee

TITLE **Bernard Shorkey** ☒ Change ☐ Addition
 NAME **780 17th Ave**
 STREET ADDRESS **Sectr.**
 CITY-ST-ZIP **Vero Bch FL 32962**

TITLE **BMD** ☐ Delete
 NAME **YOUNG, EDWARD**
 STREET ADDRESS **346 HERITAGE BLVD**
 CITY-ST-ZIP **VERO BEACH FL 32966**

TITLE **Mike Hosford** ☐ Change ☐ Addition
 NAME **770 Miracle Mile**
 STREET ADDRESS **Trustee**
 CITY-ST-ZIP **Vero Bch FL 32960**

TITLE **T** ☐ Delete
 NAME **GALVIN, HAL**
 STREET ADDRESS **19 PLANTATION DR**
 CITY-ST-ZIP **VERO BEACH FL 32966**
Sgt. @ Arms

TITLE **Willie Cotton** ☒ Change ☐ Addition
 NAME **14338 Amapola Cir**
 STREET ADDRESS **Trustee**
 CITY-ST-ZIP **Ft. Pierce FL 34951**

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 Paz**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date **4/28/02** 772-778-1299
 Daytime Phone #

CR2E037 (9/01)