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May 16 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N93000001992 (7)**

1. Corporation Name

**VIETNAM VETERANS OF AMERICA, INC. CHAPTER #682 K
EY WEST, FLORIDA**

Principal Place of Business

**9H, 5TH AVENUE
KEY WEST FL 33040**

Mailing Address

**9H, 5TH AVENUE
KEY WEST FL 33040**

3. Date Incorporated or Qualified
05/03/1993

3a. Date of Last Report
06/06/1996

2. Principal Place of Business

21 3346 NORTHSIDE DR

2a. Mailing Address

26 3346 NORTHSIDE DR

Suite, Apt. #, etc.

22 SUITE 101

Suite, Apt. #, etc.

27 SUITE 101

City & State

23 KEY WEST, FL

City & State

28 KEY WEST, FL

Zip

24 33040

Country

25 USA

Zip

29 33040

Country

30 USA

4. FEI Number

65-0393462

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution



**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes



Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**COLLINS, WILLIE G
9H, 5TH AVENUE
KEY WEST FL 33040**

81 Name

DR JON SCHIFF

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

3346 NORTHSIDE DRIVE

83

SUITE 101

84

KEY WEST

FL

85

**Zip Code
33040**

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PCD** ☒ DELETE
NAME **COLLINS, WILLIE G**
STREET ADDRESS **9415TH AVE**
CITY-ST-ZIP **KEY WEST FL**

TITLE **VP** ☒ DELETE
NAME **JON SCHIFF, DR**
STREET ADDRESS **PO BOX 4063 N/A**
CITY-ST-ZIP **KEY WEST FL**

TITLE **TD** ☐ DELETE
NAME **ROBERTS, RICHARD**
STREET ADDRESS **2825 FLAGLER AVE**
CITY-ST-ZIP **KEY WEST FL**

TITLE **SD** ☒ DELETE
NAME **JOHNSON, KEN**
STREET ADDRESS **1110 WHITEHEAD**
CITY-ST-ZIP **KEY WEST FL**

TITLE **D** ☐ DELETE
NAME **THOMPSON, FLOYD J.**
STREET ADDRESS **408-A KEYWEST BY THE SEA**
CITY-ST-ZIP **KEY WEST FL**

TITLE **D** ☐ DELETE
NAME **CRUSOE, EDWARD**
STREET ADDRESS **RT 4 BOX 308 N/A**
CITY-ST-ZIP **SUMMERLAND KEY FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **PCD** ☒ Change ☐ Addition
1.2 NAME **JON SCHIFF**
1.3 STREET ADDRESS **3346 NORTHSIDE DRIVE, SUITE 101**
1.4 CITY-ST-ZIP **KEY WEST, FL**

2.1 TITLE **VP** ☒ Change ☐ Addition
2.2 NAME **ROBERT MACLEOD**
2.3 STREET ADDRESS **512 GRINNELL STREET**
2.4 CITY-ST-ZIP **KEY WEST, FL 33040**

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE **SD** ☒ Change ☐ Addition
4.2 NAME **RONALD JOHNSON**
4.3 STREET ADDRESS **1404 ALBANY ST**
4.4 CITY-ST-ZIP **KEY WEST, FL 33040**

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Signature Required

1 MAY 97 (305) 293-9490

CFR2037 (9/96)