

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N93000005441

**FILED**  
**Feb 16, 2010**  
**Secretary of State**

**Entity Name:** VETERANS FREEDOM MEMORIAL COMMITTEE, INC.

**Current Principal Place of Business:**

510 ROBIN HILL CIRCLE  
BRANDON, FL 33510

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 151  
BRANDON, FL 33509151 US

**New Mailing Address:**

**FEI Number:** 59-3264589

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BRAUN, DAVID  
510 ROBIN HILL CIRCLE  
BRANDON, FL 33510 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:** PD  
**Name:** BRAUN, DAVID  
**Address:** 510 ROBIN HILL CIRCLE  
**City-St-Zip:** BRANDON, FL 33510

**Title:** SD  
**Name:** BRAUN, JOYCE BRAUN  
**Address:** 510 ROBIN HILL CIRCLE  
**City-St-Zip:** BRANDON, FL 33510

**Title:** VD  
**Name:** KRAMER, JAMES R. SR  
**Address:** 9334 DANIELS MILL DR  
**City-St-Zip:** JACKSONVILLE, FL 32244

**Title:** D  
**Name:** DIXON, GLORIA D.  
**Address:** P.O. BOX 173  
**City-St-Zip:** SILVA, NC 28779

**Title:** T  
**Name:** SEALY, GENE  
**Address:** 8730 NORTH HIMES SUITE 1018  
**City-St-Zip:** TAMPA, FL 33614

I hereby 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 all other like empowered.

**SIGNATURE:** DAVE BRAUN

**PRES**

**02/16/2010**

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date