2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

changed, or on an attachment with an address, with all other like empo

SIGNATURE:

Secretary of State DOCUMENT # N96000000947 02-05-2004 90017 013 ****61 25 UNITED VETERANS ADVISORY COUNCIL AND THRIFT STORE OF PALM BEACH COUNTY, INC. Principal Place of Business Mailing Address 1010 JASMINE DR 1010 JASMINE DR 94010489 LAKE PARK, FL 33403 LAKE PARK, FL 33403 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #. etc. 01142004 Chq-NP CR2E037 (10/03) City & State City & State Applied For FEI Number 65-0426172 Not Applicable Zip \$8.75 Additional Country Country 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CARL MATTIOLA MATTIOLI, CARL. 3564-A WILDWOOD FOREST COURT Address (P.O. Box Number is Not Acceptable) 3865 15th Street WEST PALM BEACH, FL 33403 Micco 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. I am familiar with, and accept the obligations of registered agent. ADDRESS CORRECTION ONLY Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing **\$5.00** May Be Make check payable to Filing Fee is \$61.25 Trust Fund Contribution. Fiorida Department of State Due by May 1, 2004 Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TREASURER D Delete TITLE TITLE ☐ Change Addition LUTIN, JACK PETER SGARLATO NAME STREET ADDRESS 3826 WHITE HALL DR STREET ADORESS 146 Santa Barbara Way WEST PALM BEACH, FL CITY-ST-ZIP CITY-ST-ZIP Palm Beach Gardens FL <u> 33410</u> TITLE ST Delete TITLE VICE PRESIDENT ☐ Change Addition KOSINSKI, MARY NAME NAME SHARON HILLEBRANDT STREET ADDRESS 253 FALL CIRCLE STREET ADDRESS 3529 Sapphire Road CITY-ST-ZIP PALM BEACH GARDENS, FL 33410 CITY-ST-7/P LANTANA, FL 33462 TITLE ☐ Delete TITLE **Change** ■ Addition PRESIDENT MATTIOLI, CARL NAME NAME CARL MATTIOLI STREET ADDRESS 3564 A WILDWOOD STREET ADDRESS LAKE PARK, FL 3865 15th STREET CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE MICCO, FL 32976-2847 Change Addition NAME MAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZP Delete ПΠЕ TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIF CITY-ST-ZIP TITLE Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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

G OFFICER OR DIRECTOR

FILED

Feb 05, 2004 8:00 am