

# 2002 UNIFORM BUSINESS REPORT (UBR) \* 6/16/2002-90705-01

**FILED**  
**Sep 16, 2002 8:00 am**  
**Secretary of State**

06-16-2002 90705 001 \*\*\*\*\*8.75  
 06-16-2002 90705 002 \*\*\*\*\*61.25

**DOCUMENT # N99000002733**

1. Entity Name

**VIETNAM VETERANS OF AMERICA, INC., CHAPTER #826-  
 PANAMA CITY, FL.**

Principal Place of Business

614 FLIGHT AVE.  
 PANAMA CITY FL 32404

Mailing Address

614 FLIGHT AVE.  
 PANAMA CITY FL 32404

2. Principal Place of Business

2217 EAST CALLAWAY Hgts  
 Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 10098  
 Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

PANAMA CITY FL  
 Zip 32404 Country USA

City & State

PANAMA CITY, Florida  
 Zip 32404 Country USA

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FAGOT, EDWARD H  
 614 FLIGHT AVE.  
 PANAMA CITY FL 32404

7. Name and Address of New Registered Agent

Name Peter S. Niececki

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

2217 E Callaway Hgts

Panama City

Panama City

FL Zip Code 32404

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

Peter S. Niececki

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

(NOTE: Registered Agent signature required when resigning)

29 APRIL 2002

DATE

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

TITLE PO  
 NAME FAGOT, EDWARD H  
 STREET ADDRESS 614 FLIGHT AVE.  
 CITY-ST-ZIP PANAMA CITY FL 32404 ☐ Delete

TITLE VO  
 NAME FILLINGER, JON R  
 STREET ADDRESS 119 KIMBERLY CIRCLE  
 CITY-ST-ZIP CALLOWAY FL 32404 ☐ Delete

TITLE TD  
 NAME BACINO, RAY D.  
 STREET ADDRESS 5048 E. HWY 88  
 CITY-ST-ZIP PARKER FL 32404 ☐ Delete

TITLE SD  
 NAME NEWBERRY, DAWN E  
 STREET ADDRESS 614 FLIGHT AVE.  
 CITY-ST-ZIP PANAMA CITY FL 32404 ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE Pres  
 NAME PETER S. NIECKECKI  
 STREET ADDRESS 2217 EAST CALLAWAY Hgts  
 CITY-ST-ZIP PANAMA CITY, FL 32404 ☒ Change ☐ Addition

TITLE VP  
 NAME Edward Murphy  
 STREET ADDRESS 5318 ELIZABETH AVENUE  
 CITY-ST-ZIP PANAMA CITY BEACH FLORIDA 32408 ☒ Change ☐ Addition

TITLE TRUST  
 NAME BRUCE P. BROCKENFELD  
 STREET ADDRESS 1214 BERTHA AVE.  
 CITY-ST-ZIP CALLAWAY FL 32404 ☒ Change ☐ Addition

TITLE Sec  
 NAME SAIAN CITY  
 STREET ADDRESS P.O. Box 10098 (2217 E CALLAWAY Hgts)  
 CITY-ST-ZIP PANAMA CITY FL 32404 ☒ Change ☐ Addition

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

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:

PETER S. NIECKECKI

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

29 APRIL 2002

Date

Daytime Phone #

CR2007 (9/01)