

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002733

FILED
Jul 21, 2004
Secretary of State

Entity Name: VIETNAM VETERANS OF AMERICA, INC., CHAPTER #826-PANAMA CITY, FL.

Current Principal Place of Business:

2217 EAST CALLAWAY HGTS
PANAMA CITY, FL 32404

New Principal Place of Business:

Current Mailing Address:

PO BOX 10098
PANAMA CITY, FL 32404

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

NIECIECKI, PETER S
2217 EAST CALLAWAY HGTS
PANAMA CITY, FL 32404

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 () Delete
Name: NIECIECKI, PETER S
Address: 2217 EAST CALLAWAY HGTS
City-St-Zip: PANAMA CITY, FL 32404

Title: VPD () Delete
Name: MURPHY, EDWARD
Address: 8318 ELIZABETH AVENUE
City-St-Zip: PANAMA CITY BEACH, FL 32408

Title: TD () Delete
Name: NIERICK, PETER
Address: 2217 S CALLAWAY HGTS
City-St-Zip: PANAMA CITY, FL 32404

Title: SD () Delete
Name: HINSON, JAMES
Address: 5130 N LAKEWOOD DR
City-St-Zip: PANAMA CITY, FL 32404

Title: DT () Delete
Name: GRIBAS, MICHAEL
Address: 701 KRYSTAL LAND
City-St-Zip: LYNN HAVEN, FL 32444

Title: DT () Delete
Name: WENTWORTH, CLAYTON
Address: 3218 E 7TH STREET
City-St-Zip: PANAMA CITY, FL 324011209

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: PETER S. NIECIECKI

PD

07/21/2004

Electronic Signature of Signing Officer or Director

Date