

2000 UNIFORM BUSINESS REPORT (UBR)

5/10/00-90089-014-\$61.25-\$61.25

DOCUMENT # N99000004828

1. Entity Name

VIETNAM RIVERINE FORCES ASSOCIATION, INC.

FILED

00 JUN -9 PM 1:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business

PO BOX 1974
GREEN COVE SPRINGS FL 32043

Mailing Address

PO BOX 1974
GREEN COVE SPRINGS FL 32043-1974

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

P.O. Box 1974

Suite, Apt. #, etc.

City & State

GREEN COVE SPRINGS FL

Zip

32043-1974

Country

4. EFL Number

59-3593264

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MACKEY, JOSEPH M

3911 RIO VISTA CIR

GREEN COVE SPRINGS FL 32043

7. Name and Address of New Registered Agent

Name

Same

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

City

FL

Zip Code

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

Joseph M. Mackey

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

(NOTE: Registered Agent signature required when reinstating)

JAN 8, 2000

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 ☐ Delete

NAME

STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME

STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME

STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME

STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME

STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME

STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☒ Change ☐ Addition

NAME

STREET ADDRESS
CITY-ST-ZIP

P/D
Joseph M. Mackey
3911 Rio Vista Circle
Green Cove Springs FL 32043

TITLE ☒ Change ☐ Addition

NAME

STREET ADDRESS
CITY-ST-ZIP

M/D
MARVIN O. HINDAR
3911 Rio Vista Circle
Green Cove Springs FL 32043

TITLE ☒ Change ☐ Addition

NAME

STREET ADDRESS
CITY-ST-ZIP

V/D
TERRY D. POWERS
1002 LENA ROAD
Green Cove Springs FL 32043

TITLE ☒ Change ☐ Addition

NAME

STREET ADDRESS
CITY-ST-ZIP

S/D
DAYTON L. WILSON
204 Gum Street
Green Cove Springs FL 32043

TITLE ☐ Change ☐ Addition

NAME

STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME

STREET ADDRESS
CITY-ST-ZIP

SP

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: Joseph M. Mackey REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAN 8, 2000 904-529-8325

Date

Daytime Phone #

CR2E037 (9/99)