2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P30155

FILED Apr 22, 2009 Secretary of State

Entity Name: VETERANS FOR AMERICA, INC.

Current	rincipal Place	e of Business:	New Principal Place of Business:
7TH FLOC	MONT AVE N OR GTON, DC 200		
	·		Nove Martine and decree
Current IV	lailing Addres	3S :	New Mailing Address:
7TH FLOC	MONT AVE N OR STON, DC 200		
	: 13-3030278	FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
Name and	l Address of (Current Registered Age	nt: Name and Address of New Registered Agent:
1718 MAH	KAREN AB ENGINEER IAN DRIVE SSEE, FL 323		
	e named entity e of Florida.	submits this statement for	r the purpose of changing its registered office or registered agent, or both,
SIGNATUI	RE:		
	Electron	nic Signature of Registere	ed Agent Date
OFFICER	S AND DIREC	TORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR
Title: Name: Address: City-St-Zip:	MULLER, ROB	IY AVE NW., 7TH FLR	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Vame: Address:	TERZANO, JOI	IT AVE NW, 7TH FLR	Title: () Change () Addition Name: Address: City-St-Zip:
City-St-Zip:			
City-St-Zip: Title: Name: Address:	WILLIAMS, CR	IT AVE NW, 7TH FLR	Title: () Change () Addition Name: Address: City-St-Zip:
	WILLIAMS, CR 1025 VERMON WASHINGTON	RAIG IT AVE NW, 7TH FLR	Name: Address:
City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	WILLIAMS, CR 1025 VERMON WASHINGTON (AIG IT AVE NW, 7TH FLR I, DC 20005	Name: Address: City-St-Zip: Title: CFO () Change (X) Addition Name: THRASHER, PAUL Address: 1025 VERMONT AVE NW, 7TH FLR

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: ROBERT MULLER PC 04/22/2009