# 2023 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**DOCUMENT# 708777** 

Entity Name: VETERANS COUNCIL OF HILLSBOROUGH COUNTY, INC.

**FILED** Nov 29, 2023 Secretary of State 9746885306CC

## **Current Principal Place of Business:**

VETERANS RESOURCE CENTER 3602 U.S. HWY 301 NORTH UNIT #4 VETERANS MEMORIAL PARK TAMPA, FL 33619

# **Current Mailing Address:**

VETERANS RESOURCE CENTER 3602 U.S. HWY 301 NORTH UNIT #4 VETERANS MEMORIAL PARK TAMPA, FL 33619 US

FEI Number: 38-3940343 Certificate of Status Desired: Yes

### Name and Address of Current Registered Agent:

RAYSICK, WALTER 223 BON VIE PL VALRICO, FL 33594 US

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

#### Officer/Director Detail:

Title Title **TRUSTEE** Name CONOVER, CHARLIE Name GROSS, TONI

Address VETERANS RESOURCE CENTER Address 711 SATINLEAF AVE 3602 U.S. HWY 301 NORTH UNIT #4

OLDSMAR FL 34677 City-State-Zip:

VETERANS MEMORIAL PARK

City-State-Zip: **TAMPA FL 33619** Title **TRUSTEE** 

BRAUN, DAVE Title Name TR

510 ROBIN HILL DR Address Name RAYSICK, WALTER E.

City-State-Zip: BRANDON FL 33510 Address 223 BON VIE PLACE

City-State-Zip: VALRICO FL 33594 Title 1ST VP

Name HOLDER, GREGORY P. Title 2ND VP

Address 5812 BAYSHORE DRIVE Name FLETCHER, JAMES

City-State-Zip: **TAMPA FL 33611** Address P.O. BOX 89247

TAMPA FL 33689 City-State-Zip:

I hereby 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 all other like empowered.

SIGNATURE: WALTER E. RAYSICK, SR.

**TREASURER** 

11/29/2023