2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2015
Secretary of State
CC5215456021

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Entity Name: VETS HELPING HEROES, INC

Current Principal Place of Business:

7374 WOODMONT COURT
BOCA RATON, FL 33434

Current Mailing Address:

PO BOX 540723
GREENACRES, FL 33454 US

FEI Number: 26-1300231

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

STOVROFF, IRWIN
7374 WOODMONT COURT
BOCA RATON, FL 33434 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	DIRECTOR
Name	BARRETO, PAUL
Address	112 POINT SOUTH DR
City-State-Zip:	WELAKA FL 32193

Title	DIRECTOR
Name	GENOVESE, KATHY
Address	2 HUNTINGTON ROAD
City-State-Zip:	HUNTINGTON NY 11743

Title	TREASURER
Name	MORGENSTEIN, CHARLES
Address	8000 NORTH FEDERAL HIGHWAY SUITE 207
City-State-Zip:	BOCA RATON FL 33487-1681

Title	DIRECTOR
Name	VAN BLOIS, JOHN
Address	550 NE 14TH STREET
City-State-Zip:	BOCA RATON FL 33432

Title	PRESIDENT
Name	STOVROFF, IRWIN
Address	7374 WOODMONT COURT
City-State-Zip:	BOCA RATON FL 33434

Title	DIRECTOR
Name	MOLINA, LOUIS
Address	4719 MONROE ST.
City-State-Zip:	HOLLYWOOD FL 33021

Title	DIRECTOR
Name	POLLACK, MELVIN
Address	800 N OCEAN BLVD. APT. 1
City-State-Zip:	DELRAY BEACH FL 33483-7245

Title	CHAIRMAN
Name	WERNER, DON
Address	17663 LAKE ESTATES DRIVE
City-State-Zip:	BOCA RATON FL 33496

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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: PAT LEVENSON — EXECUTIVE DIRECTOR — 03/10/2015

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	ENGELMAN, ROBERT
Address	18030 NW 15TH COURT
City-State-Zip:	PEMBROKE PINES FL 33029

Title	EXECUTIVE DIRECTOR
Name	LEVENSON, PAT
Address	PO BOX 540723
City-State-Zip:	GREENACRES FL 33454