

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000002305

Entity Name: VETERANS OCEAN ADVENTURES, INC**Current Principal Place of Business:**8803 SW 206TH LN
CUTLER BAY, FL 33189-3324**Current Mailing Address:**PO BOX 226571
DORAL, FL 33222-6571 US**FEI Number:** 26-4179467**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**RECTOR, BRANSON P
8803 SW 206TH LN
CUTLER BAY, FL 33189-3324 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	D
Name	RECTOR, BRANSON P
Address	8803 SW 206TH LN
City-State-Zip:	CUTLER BAY FL 33189-3324

Title	D
Name	GIES, MEAGHAN
Address	1439 URBINO AVE
City-State-Zip:	MIAMI FL 33146

Title	D
Name	RANDALL, PATRICIA
Address	10265 NW 4TH CT
City-State-Zip:	PLANTATION FL 33324

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: BRANSON P. RECTOR

PRESIDENT

04/13/2021

Electronic Signature of Signing Officer/Director Detail_____
Date