# 2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

### DOCUMENT# N9900006995

Entity Name: VIETNAM BROTHERHOOD, INC.

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

P.O BOX 380447 MURDOCK, FL 33938

### **Current Mailing Address:**

519 PEMBROKE DR PORT CHARLOTTE, FL 33954 US

# FEI Number: 65-0969515

### Name and Address of Current Registered Agent:

CARTER, KATHIE 519 PEMBROKE DR PORT CHARLOTTE, FL 33954 US

Date

Certificate of Status Desired: No

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

# **Officer/Director Detail :**

Title	D	Title	DCEO
Name	RUSS, BRIAN	Name	CARTER, IVAN C
Address	7576 PALMER GLEN CIR	Address	PO BOX 1073
City-State-Zip:	SARASOTA FL 34240	City-State-Zip:	VENICE FL 34284
Title	CFO	Title	D
Name	CARTER, KATHIE	Name	BARTLEY, DANIEL
Address	519 PEMBROKE DR	Address	7363 BARRAGAN RD
City-State-Zip:	PORT CHARLOTTE FL 33954	City-State-Zip:	FT MYERS FL 33967
Title	TREASURER	Title	D
Title Name	TREASURER HUTCHINSON, THOMAS	Title Name	D HUBBS, BOB
Name	HUTCHINSON, THOMAS 3580 GLOXINIA DR	Name	HUBBS, BOB
Name Address	HUTCHINSON, THOMAS 3580 GLOXINIA DR	Name Address	HUBBS, BOB 857 ENTRADA DR
Name Address City-State-Zip:	HUTCHINSON, THOMAS 3580 GLOXINIA DR N FT MYERS FL 33917	Name Address City-State-Zip:	HUBBS, BOB 857 ENTRADA DR FT MYERS FL 33919
Name Address City-State-Zip: Title	HUTCHINSON, THOMAS 3580 GLOXINIA DR N FT MYERS FL 33917 D	Name Address City-State-Zip: Title	HUBBS, BOB 857 ENTRADA DR FT MYERS FL 33919 D
Name Address City-State-Zip: Title Name	HUTCHINSON, THOMAS 3580 GLOXINIA DR N FT MYERS FL 33917 D PHIL, MENENDEZ	Name Address City-State-Zip: Title Name	HUBBS, BOB 857 ENTRADA DR FT MYERS FL 33919 D WEINBERG, CHUCK

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: KATHIE CARTER

CFO

Electronic Signature of Signing Officer/Director Detail