

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000009342

FILED  
Mar 15, 2010  
Secretary of State

**Entity Name:** CONTINENTAL VETERANS ASSOCIATION, INC.

**Current Principal Place of Business:**

113 ROBIN LANE  
WILDWOOD, FL 34785

**New Principal Place of Business:**

**Current Mailing Address:**

113 ROBIN LANE  
WILDWOOD, FL 34785

**New Mailing Address:**

113 ROBIN LANE  
WILDWOOD, FL 34785 US

FEI Number: 56-2639253

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

JOHNSON, RICHARD  
104 FOREST BLVD  
WILDWOOD, FL 34785 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: GRAY, WILLIAM  
Address: 113 ROBIN LANE  
City-St-Zip: WILDWOOD, FL 34785

Title: V  
Name: JOHNSON, RICHARD  
Address: 104 FOREST BLVD  
City-St-Zip: WILDWOOD, FL 34785

Title: S  
Name: DELAMATER, EDITH  
Address: 503 FOREST BLVD.  
City-St-Zip: WILDWOOD, FL 34785

Title: T  
Name: FARVER, KENNETH  
Address: 4 GROVE TRAIL  
City-St-Zip: WILDWOOD, FL 34785

Title: D  
Name: KEN, VAN DENORTH  
Address: 24 NORTH BOBWHITE RD.  
City-St-Zip: WILDWOOD, FL 34785

Title: D  
Name: THOMPSON, GEORGE  
Address: 600 S. TIMBER TRAIL  
City-St-Zip: WILDWOOD, FL 34785

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: WILLIAM H. GRAY

PRES

03/15/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date