2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000009342

Entity Name: CONTINENTAL VETERANS ASSOCIATION, INC.

FILED
Jan 02, 2019
Secretary of State
CC1104118997

Current Principal Place of Business:

501 FOREST BLVD WILDWOOD, FL 34785

Current Mailing Address:

501 FOREST BLVD

WILDWOOD, FL 34785 US

FEI Number: 56-2639253 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SCHOOLS, WILLIAM COMMANDER 411 S TIMBER TR, WILDWOOD, FL 34785 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: WILLIAM SCHOOLS 01/02/2019

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title COMMANDER Title SECRETARY

Name HOFFMAN, DALE ALLEN VP Name ONDO, ROBERT SECRETARY

Address 12 GOLF VIEW TRL Address 12 MAGNOLIA LANE

City-State-Zip: WILDWOOD FL 34785

City-State-Zip: WILDWOOD FL 34785

Title TREASURER Title DIRECTOR

Name LAPLANTE, EVERETTE TREASURER Name GRAY, WILLIAM PUBLIC AFFAIRS

Address 501 FOREST BLVD Address 113 ROBIN LN.

City-State-Zip: WILDWOOD FL 34785 City-State-Zip: WILDWOOD FL 34785

Title DIRECTOR Title DIR

NameKEIFER, RICHARDNameVAN DENORTH, KENAddress19 BOBCAT TR,.Address24 N BOBWHITE RD.City-State-Zip:WILDWOOD FL 34785City-State-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: EVERETTE E LAPLANTE

Electronic Signature of Signing Officer/Director Detail

TREASURER

01/02/2019