

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000009342

Entity Name: CONTINENTAL VETERANS ASSOCIATION, INC.

Current Principal Place of Business:

21 S BOBWHITE RD
WILDWOOD, FL 34785

Current Mailing Address:

21 S BOBWHITE RD
WILDWOOD, FL 34785 US

FEI Number: 56-2639253

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ABNER, CHARLES R. TREASUER
21 S BOBWHITE RD
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: CHARLES R. ABNER

01/10/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title COMMANDER
Name HORSMAN, SUSAN COMMANDER
Address 21 S BOBWHITE RD
City-State-Zip: WILDWOOD FL 34785

Title SECRETARY
Name GARRET, BOB FIRST VICE
Address 110 SUGAR MAPLE AVE
City-State-Zip: WILDWOOD FL 34785

Title TREASURER
Name ABNER, CHARLES R TREASURER
Address 21 S. BOBWHITE RD
City-State-Zip: WILDWOOD FL 34785

Title SECRETARY
Name WHITMER, LYNN SECRETARY
Address 83 N. BOBWHITE RD.
City-State-Zip: WILDWOOD FL 34785

Title DIRECTOR
Name SUMMERS, BILL CHAPLAN
Address 405 S.TIMER TRAIL
City-State-Zip: WILDWOOD FL 34785

Title DIRECTOR
Name BENDERMAN, BOB
Address 507 S. TIMBER TRAIL
City-State-Zip: WILDWOOD FL 34785

Title FIRST VICE
Name HUTSON, DAVE DIRECTOR
Address 25 S BOBWHITE RD
City-State-Zip: WILDWOOD FL 34785

Title DIRECTOR
Name STERLACE, DANIEL DIRECTIOR
Address 118 LYONIA L
City-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: CHARLES ABNER

TREASURER

01/10/2024

Electronic Signature of Signing Officer/Director Detail

Date