

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 705541

FILED  
May 01, 2011  
Secretary of State

**Entity Name:** CASSELBERRY VETERANS, INC.

**Current Principal Place of Business:**

200 CONCORD DRIVE  
BOX 180365  
CASSELBERRY, FL 32718 US

**New Principal Place of Business:**

**Current Mailing Address:**

200 CONCORD DRIVE  
BOX 180365  
CASSELBERRY, FL 327187365 US

**New Mailing Address:**

**FEI Number:** 59-2867256      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

TRULL, ROBERT  
1670 CLEMATIS LANE  
WINTER PARK, FL 32792 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: CIPOLLA, BARTHOLOMEW J  
Address: 629 HOLLY HILL AVENUE  
City-St-Zip: CASSELBERRY, FL 32707

Title: T  
Name: TRULL, ROBERT  
Address: 1670 CLEMATIS LANE  
City-St-Zip: WINTER PARK, FL 32792

Title: VPD  
Name: ERNST, JERRY  
Address: 5300 N. WOODCREST DRIVE  
City-St-Zip: WINTER PARK, FL 32792

Title: JRVP  
Name: COLEMAN, DONALD G  
Address: 749 ORCHID AVENUE  
City-St-Zip: CASSELBERRY, FL 32707

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: BARTHOLOMEW J CIPOLLA

P

05/01/2011

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

\_\_\_\_\_  
Date