

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 739335

FILED  
Jan 03, 2007  
Secretary of State

**Entity Name:** CENTRAL FLORIDA CHAPTER PARALYZED VETERANS OF AMERICA, INC.

**Current Principal Place of Business:**

2711 SOUTH DESIGN COURT  
SANFORD, FL 32773

**New Principal Place of Business:**

**Current Mailing Address:**

2711 SOUTH DESIGN COURT  
SANFORD, FL 32773

**New Mailing Address:**

**FEI Number:** 59-1793434

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

COPELAND, HARRY  
14527 TANJA KING BLVD  
ORLANDO, FL 32828 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: V ( ) Delete  
Name: NIMZ, LAURA  
Address: 22 ORMOND GREEN BLVD  
City-St-Zip: NEW SMYRNA BEACH, FL 32174

Title: T ( ) Delete  
Name: DUGAN, JERRY  
Address: 4 SLEEPY HOLLOW COVE  
City-St-Zip: LONGWOOD, FL 32750

Title: P ( ) Delete  
Name: RUDOLPH, GARY C  
Address: 2900 REGENT DRIVE  
City-St-Zip: DELTONA, FL

Title: S ( ) Delete  
Name: LUKAS, CONNIE  
Address: 535 PRESTON ROAD  
City-St-Zip: LONGWOOD, FL 32759

Title: D ( ) Delete  
Name: CARTER, KENNETH  
Address: 270 STONE ISLAND ROAD  
City-St-Zip: ENTERPRISE, FL 32725

Title: D ( ) Delete  
Name: MOUNT, WILLIAM  
Address: 1395 KETTLEDROM TR  
City-St-Zip: ENTERPRISE, FL 32725

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PRES (X) Change ( ) Addition  
Name: COMBS, MICHAEL  
Address: 282 HANGING MOSS CIRCLE  
City-St-Zip: LAKE MARY, FL 32746

Title: TREA (X) Change ( ) Addition  
Name: DUGAN, JERRY  
Address: 4 SLEEPY HOLLOW COVE  
City-St-Zip: LONGWOOD, FL 32750

Title: V.P. (X) Change ( ) Addition  
Name: KIRK, STEVE  
Address: 1773 MONTICELLO STREET  
City-St-Zip: DELTONA, FL 32725

Title: SEC (X) Change ( ) Addition  
Name: LUKAS, CONNIE  
Address: 535 PRESTON ROAD  
City-St-Zip: LONGWOOD, FL 32759

Title: DIR. (X) Change ( ) Addition  
Name: NEMESIO, GONZALEZ  
Address: 403 CORNWALL ROAD  
City-St-Zip: WINTER PARK, FL 32792

Title: DIR. (X) Change ( ) Addition  
Name: BRAIN, TERWILLIGER  
Address: 110 LAKE MINNIE DRIVE  
City-St-Zip: SANFORD, FL 32773

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MICHAEL COMBS

PRES

01/03/2007

Electronic Signature of Signing Officer or Director

Date