


# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 23, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # N01000005903</b>	
1. Entity Name USS LONG BEACH CGN9 ASSOCIATION, INCORPORATED	

Principal Place of Business 1113 SHADOW WOOD COURT LAKELAND, FL 33813-3645	Mailing Address 1113 SHADOW WOOD COURT LAKELAND, FL 33813-3645
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DO NOT WRITE IN THIS SPACE



01102004 No Chg-NP CR2E037 (10/03)

4. FEI Number 14-6328880	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent  SHAW, RONALD 1113 SHADOW WOOD COURT LAKELAND, FL 33813-3645
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
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<b>Filing Fee is \$61.25 Due by May 1, 2004</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD SHADE, DONALD L 251 PATTERSON RD., #G31 HAINES CITY, FL 338447838
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD GOWERS, NORM 2650 S.E. 147TH AVENUE MORRISTON, FL 32381
TITLE NAME STREET ADDRESS CITY - ST - ZIP	STD SHAW, RONALD 1113 SHADOW WOOD COURT LAKELAND, FL 338133645
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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U000000010802  
01/23/04-80012-013 61.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

<b>SIGNATURE:</b>  <u>RONALD D. SHAW</u>	Date <u>01/11/04</u> (883) 646-3202
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	