

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005903

FILED  
Mar 01, 2009  
Secretary of State

**Entity Name:** USS LONG BEACH CGN9 ASSOCIATION, INCORPORATED

**Current Principal Place of Business:**

11486 113 RD  
LIVE OAK, FL 32060

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1482  
LIVE OAK, FL 320641482

**New Mailing Address:**

**FEI Number:** 14-6328880

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SHAW, RONALD  
11486 113RD  
POB 1482  
LIVE OAK, FL 32060 US

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

SHAW, RONALD  
11486 113RD  
LIVE OAK, FL 32060 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:

03/01/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: SHADE, DONALD L  
Address: 251 PATTERSON RD., #G31  
City-St-Zip: HAINES CITY, FL 338447838

Title: VD ( ) Delete  
Name: O'ROURKE, MICHAEL  
Address: 1747 WOLBERT TERR  
City-St-Zip: UNION, NJ 07083

Title: STD ( ) Delete  
Name: SHAW, RONALD  
Address: 11486 113 RD  
City-St-Zip: LIVE OAK, FL 320641482

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: RONALD SHAW

STD

03/01/2009

Electronic Signature of Signing Officer or Director

Date