

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000009342

FILED
Jan 19, 2012
Secretary of State

Entity Name: CONTINENTAL VETERANS ASSOCIATION, INC.

Current Principal Place of Business:

503 FOREST BLVD
WILDWOOD, FL 34785

New Principal Place of Business:

Current Mailing Address:

503 FOREST BLVD
WILDWOOD, FL 34785 US

New Mailing Address:

FEI Number: 56-2639253

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAYES, THOMAS
119 ROBIN LN.
WILDWOOD, FL 34785 US

Name and Address of New Registered Agent:

LAPLANTE, BUD
501 FOREST BLVD
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: BUD LAPLANTE

01/19/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP
Name: LAPLANTE, BUD
Address: 501 FOREST BLVD
City-St-Zip: WILDWOOD, FL 34785 US

Title: DV
Name: WEBER, MICHAEL
Address: 20 S. BOBWHITE RD.
City-St-Zip: WILDWOOD, FL 34785 US

Title: DS
Name: PEEVER, DOREEN
Address: 113 BIG OAK LN.
City-St-Zip: WILDWOOD, FL 34785 US

Title: D
Name: KEN, VAN DENORTH
Address: 24 NORTH BOBWHITE RD.
City-St-Zip: WILDWOOD, FL 34785 US

Title: D
Name: THOMPSON, GEORGE
Address: 600 S. TIMBER TRAIL
City-St-Zip: WILDWOOD, FL 34785 US

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: BUD LAPLANTE

DP

01/19/2012

Electronic Signature of Signing Officer or Director

Date