2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 31, 2007 8:00 am
Secretary of State
01-31-2007 90050 048 ****61.25

DOCUMENT # N47224

1. Entity Name

U.S.S. INDEPENDENCE CVL22 REUNION GROUP, INC.

Principal Place of Business	Mailing Address
135 CHANCELLOR DR. CHAMBERSBURG PA 17201 US	135 CHANCELLOR DR. CHAMBERSBURG PA 17201 US

1st MOORE CR2E037 (10/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 65-0190925 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

HIGGINS, CHARLES
706 GENE DR.
STARKE FL 32091-1412

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25
Due By May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	TP DENTON, NELSON R. 135 CHANCELLOR DR CHAMBERSBURG PA	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	VP ARNOLD, CHARLES 4613 PAULA DRIVE MEMPHIS TN 38116-7240	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	☒ Change ☐ Addition VP ARNOLD, CHARLES 3589 COVINGTON PIKE APT 303 MEMPHIS, TN 38128-3514
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	TS SEACE, EDWIN R. 2809 FIDDLERS GREEN ROAD LANCASTER PA	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	TT DENTON, NELSON R 135 CHIONCELLOR DRIVE CHAMBERSBURG PA 17201	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	D D'AIUTO, ANTHONY 24 GREEN 112R DR THORNDALE PA 19372-1152	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	☒ Change ☐ Addition D D'AIUTO, ANTHONY 24 GREENBRIAR RD THORNDALE, PA 19372-1113
TITLE / NAME / STREET ADDRESS / CITY ST ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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.

SIGNATURE: Nelson Denton NELSON R. DENTON 1/20/07 717 263-2258
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #