

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
Feb 07, 2008  
Secretary of State

DOCUMENT# N24011

Entity Name: COPPER LAKE ASSOCIATION, INC.

**Current Principal Place of Business:**

17221 NEWPORT CLUB DRIVE  
BOCA RATON, FL 33496 US

**New Principal Place of Business:**

**Current Mailing Address:**

17221 NEWPORT CLUB DRIVE  
BOCA RATON, FL 33496 US

**New Mailing Address:**

FEI Number: 65-0149504      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

LARSEN, MILLIE  
17133 NEWPORT CLUB DRIVE  
BOCA RATON, FL 33496 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: P ( ) Delete  
Name: NEUSTADTER, JUDITH  
Address: 17109 NEWPORT CLUB DRIVE  
City-St-Zip: BOCA RATON, FL 33496

Title: VP ( ) Delete  
Name: O'REILLY, DANIEL  
Address: 17085 NEWPORT CLUB DRIVE  
City-St-Zip: BOCA RATON, FL 33496 US

Title: T ( ) Delete  
Name: LARSEN, MILLIE  
Address: 17133 NEWPORT CLUB DRIVE  
City-St-Zip: BOCA RATON, FL 33496 US

Title: S ( ) Delete  
Name: SCHACHTER, BEN G  
Address: 17164 NEWPORT CLUB DR  
City-St-Zip: BOCA RATON, FL 33496 US

Title: D ( ) Delete  
Name: BECK, BENJAMIN  
Address: 17113 NEWPORT CLUB DR  
City-St-Zip: BOCA RATON, FL 33496 US

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

Title: P (X) Change ( ) Addition  
Name: SCHACHTER, BEN G  
Address: 17164 NEWPORT CLUB DRIVE  
City-St-Zip: BOCA RATON, FL 33496

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

Title: T (X) Change ( ) Addition  
Name: BERKOWITZ, LEN  
Address: 17164 NEWPORT CLUB DRIVE  
City-St-Zip: BOCA RATON, FL 33496 US

Title: S (X) Change ( ) Addition  
Name: FRANK, HAROLD  
Address: 17125 NEWPORT CLUB DRIVE  
City-St-Zip: BOCA RATON, FL 33496 US

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: LEN BERKOWITZ

T

02/07/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date