2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24011

Entity Name: COPPER LAKE ASSOCIATION, INC.

FILED Feb 24, 2009 Secretary of State

17221 NEWPORT CLUB DRIVE BOCA RATON, FL 33496 US

Current Mailing Address: New Mailing Address:

17221 NEWPORT CLUB DRIVE BOCA RATON, FL 33496 US

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

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

LARSEN, MILLIE

17133 NEWPORT CLUB DRIVE

BOCA RATON, FL 33496 US

BERKOWITZ, LEONARD

17208 NEWPORT CLUB DRIVE

BOCA RATON, FL 33496 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: LEONARD BERKOWITZ 02/24/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:P () DeleteTitle:P (X) Change () AdditionName:SCHACHTER, BEN GName:O'REILLY, DANIEL GAddress:17164 NEWPORT CLUB DRIVEAddress:17085NEWPORT CLUB DRIVECity-St-Zip:BOCA RATON, FL 33496City-St-Zip:BOCA RATON, FL 33496

Title: VP () Delete Title: VP (X) Change () Addition Name: O'REILLY, DANIEL Name: BECK, BENJAMIN

Address: 17085 NEWPORT CLUB DRIVE Address: 17113 NEWPORT CLUB DRIVE City-St-Zip: BOCA RATON, FL 33496 US City-St-Zip: BOCA RATON, FL 33496 US

Title: T () Delete Title: T (X) Change () Addition

Name: BERKOWITZ, LEN Name: BERKOWITZ, LEN

 Address:
 17164 NEWPORT CLUB DRIVE
 Address:
 17208 NEWPORT CLUB DRIVE

 City-St-Zip:
 BOCA RATON, FL 33496 US
 City-St-Zip:
 BOCA RATON, FL 33496 US

Title: S () Delete Title: () Change () Addition

 Name:
 FRANK, HAROLD
 Name:

 Address:
 17125 NEWPORT CLUB DRIVE
 Address:

 City-St-Zip:
 BOCA RATON, FL 33496 US
 City-St-Zip:

Title: D (X) Delete Title: () Change () Addition

 Name:
 BECK, BENJAMIN
 Name:

 Address:
 17113 NEWPORT CLUB DR
 Address:

 City-St-Zip:
 BOCA RATON, FL 33496 US
 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: LEONARD BERKOWITZ TR 02/24/2009