### 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 749695** 

Entity Name: CANOE CREEK PROPERTY OWNERS ASSOCIATION, INC.

**FILED** Feb 19, 2015 **Secretary of State** CC3713046272

# **Current Principal Place of Business:**

1092 SW WILLOW LANE PALM CITY. FL 34990

# **Current Mailing Address:**

P.O. BOX 1147

PALM CITY, FL 34991

FEI Number: 59-2374960 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

BONAN, ELIZABETH ESQ. 789 SOUTH FEDERAL HWY SUITE 101 STUART, FL 34994 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:

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Р Title DIRECTOR Title

Name CARLSON, JEREMY Name HORREL. JANICE

Address 1002 SW WILLOW LANE Address 1092 SW WILLOW LANE PALM CITY FL 34990

City-State-Zip: City-State-Zip: PALM CITY FL 34990

Title VP, SECRETARY Title Name MCMULLEN, MARK Name HAYNES, MICHAEL Address 963 SW WILLOW LANE Address 842 SW WILLOW LANE

PALM CITY FL 34990 City-State-Zip: City-State-Zip: PALM CITY FL 34990

Title Title

CANTIELLO, JON Name Name BADRAN, AMY

Address 933 SW WILLOW LANE Address 1003 SW POPLAR COURT City-State-Zip: PALM CITY FL 34990 City-State-Zip: PALM CITY FL 34990

Title **DIRECTOR** 

Name RODEN, JOSEPH

Address 1032 SW WILLOW LANE PALM CITY FL 34990 City-State-Zip:

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: JANICE HORRELL

Electronic Signature of Signing Officer/Director Detail

**PRESIDENT** 

02/19/2015