

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 759846

**FILED**  
**Feb 14, 2013**  
**Secretary of State**  
**CC0348803007**

**Entity Name:** C.P.C. ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O SWIFT MANAGEMENT SOLUTIONS  
1750 UNIVERSITY DRIVE # 205  
CORAL SPRINGS, FL 33071

**Current Mailing Address:**

C/O SWIFT MANAGEMENT SOLUTIONS  
1750 UNIVERSITY DRIVE # 205  
CORAL SPRINGS, FL 33071 US

**FEI Number:** 59-2390409

**Certificate of Status Desired:** No

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

SWIFT MANAGEMENT SOLUTIONS  
1750 UNIVERSITY DRIVE  
SUITE # 205  
CORAL SPRINGS, FL 33317-3307 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 :**

Title DP  
Name FRIEDMAN, RICHARD  
Address 21355 E DIXIE HIGHWAY, SUITE 107  
City-State-Zip: AVENTURA FL 33180

Title SD  
Name KAVANAUGH, SEAN  
Address 1693 CYPRESS POINTE DR  
City-State-Zip: CORAL SPRIGNS FL 33071

Title TD  
Name SHARF, MICHAEL  
Address 1601 CYPRESS POINTE DRIVE  
City-State-Zip: CORAL SPRINGS FL 33071

*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:** FRIEDMAN, RICHARD

PD

02/14/2013

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date