2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 769717

Entity Name: COPPERHEAD CHARITIES, INC.

Current Principal Place of Business:

36750 US 19 N.

PALM HARBOR, FL 34684

Current Mailing Address:

36750 US 19 N.

PALM HARBOR, FL 34684 US

FEI Number: 59-2319162 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WEST, TRACY 36750 US 19 N.

PALM HARBOR, FL 34684 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: TRACY WEST 04/04/2017

Electronic Signature of Registered Agent

Officer/Director Detail:

Title PRES Title DIRECTOR

Name WEST, TRACY Name VARNER, JOSEPH III

Address 36750 US 19 N. Address 100 NORTH TAMPA STREET, SUITE

4100

DIRECTOR

City-State-Zip: PALM HARBOR FL 34684 City-State-Zip: TAMPA FL 33602

Title DIRECTOR

Name MORGAN, LARRY Title GENERAL CHAIRMAN/DIRECTOR

Address 1101 EAST FLETCHER AVENUE Name MUMA, LES

Address 100 PALMETTO ROAD

City-State-Zip: TAMPA FL 33612

City-State-Zip: BELLEAIR FL 33756

Title DIRECTOR Title

Name EISCH, JIM Name GATES, TOM
Address 14480 - 62ND STREET

City-State-Zip: CLEARWATER FL 33760

Address 20621 AMANDA COURT

City-State-Zip: LAND O'LAKES FL 34638

Title DIRECTOR Title DIRECTOR

Name MOSHER, JOHN Name WOOLARD, DOUG

Address 111 N. BELCHER RD., SUITE 102 Address 1591 GULF BLVD., UNIT 701

City-State-Zip: CLEARWATER FL 33765 City-State-Zip: CLEARWATER BEACH FL 33767

Continues on page 2

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: TRACY WEST PRESIDENT 04/04/2017

Electronic Signature of Signing Officer/Director Detail

Date

FILED Apr 04, 2017

Secretary of State

CC6786472193

Date

Officer/Director Detail Continued:

CANTONIS, ALLIE

Name

Title DIRECTOR Title DIRECTOR

Name BARBER, RONDE Name BARLOW, RONICE

Address 17119 JOURNEYS END DRIVE Address 100 FOUNTAIN PARKWAY

City-State-Zip: ODESSA FL 33556 City-State-Zip: ST. PETE FL 33616

Title DIRECTOR Title GENERAL VICE

CHAIRMAN/DIRECTOR

Address 557 BAYVIEW DRIVE Name ROBINSON, KEITH

Address 8058 - 12TH AVENUE SOUTH
City-State-Zip: BELLEAIR FL 33756

City-State-Zip: ST. PETE FL 33707

Title DIRECTOR Title DIRECTOR

Name CAVNER, HOLLIS Name DOYLE, JR., DAN

Address 301 FISHERMANS WAY Address 5109 W. LEMON STREET

City-State-Zip: JUPITER FL 33477 City-State-Zip: TAMPA FL 33609

Title DIRECTOR Title DIRECTOR

Name FALK, CHIP Name FITZPATRICK, MARK

Address 400 N. TAMPA STREET Address 18520 N. DALE MABRY HWY #2500

City-State-Zip: TAMPA FL 33602 City-State-Zip: LUTZ FL 33548

TitleDIRECTORTitleDIRECTORNameFOX, ASHLEYNameGRASKA, DOUG

Address 1950 ARROWHEAD DRIVE NE Address 18167 US 19 NORTH

SUITE 200

City-State-Zip: ST. PETE FL 33703 City-State-Zip: CLEARWATER FL 33764

Title SECRETARY/TREASURER/DIRECTOR Title DIRECTOR

Name MURPHY, BRUCE Name PETRINI, RON

Address 951 SOUTH BAYSHORE BLVD. Address 2750 EAGLE AVENUE NORTH

City-State-Zip: SAFETY HARBOR FL 34695 City-State-Zip: ST. PETE FL 33716

Title DIRECTOR Title DIRECTOR

Name SMITHSON, LISA Name SULLIVAN, CHRIS

Address 11201 CORPORATE CIRCLE N. Address 1511 N. WEST SHORE BLVD.

#750

City-State-Zip: ST. PETE FL 33716 City-State-Zip: TAMPA FL 33602