

2013 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:**VARNER, JOSEPH III
100 NORTH TAMPA STREET
SUITE 4100
TAMPA, FL 33602 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	PRES
Name	KRISLE, KEVIN
Address	36750 US 19 NORTH
City-State-Zip:	PALM HARBOR FL 34684

Title	D/CH
Name	ROBBINS, DAVID
Address	2210 PELHAM ROAD NORTH
City-State-Zip:	ST. PETERSBURG FL 33710

Title	D
Name	HUGHES, CHRIS
Address	26301 US 19 NORTH
City-State-Zip:	CLEARWATER FL 33761

Title	S/D
Name	VARNER, JOSEPH III
Address	100 NORTH TAMPA STREET, SUITE 4100
City-State-Zip:	TAMPA FL 33602

Title	D
Name	BANKS, ROBERT
Address	516 LAKEVIEW ROAD, VILLA III
City-State-Zip:	CLEARWATER FL 33756

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: KEVIN KRISLE

PRESIDENT

01/22/2013

Electronic Signature of Signing Officer/Director Detail_____
Date