

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18090

Entity Name: THE COPPER FOREST ESTATES HOMEOWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**625 COPPER RIDGE DR
CANTONMENT, FL 32533**Current Mailing Address:**PO BOX 384
GONZALEZ, FL 32560 US**FEI Number: 59-2953016****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**VANN, JIMMY
625 COPPER RIDGE DR.
CANTONMENT, FL 32533 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: JIMMY VANN****03/26/2016**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRES
Name	VANN, JIMMY
Address	PO BOX 384
City-State-Zip:	GONZALEZ FL 32560

Title	VP
Name	ELLIOT, RON
Address	PO BOX 384
City-State-Zip:	GONZALEZ FL 32560

Title	TREASURER
Name	SMITH, KAREN
Address	PO BOX 384
City-State-Zip:	GONZALEZ FL 32560

Title	D
Name	WALKER, SHERRY
Address	PO BOX 384
City-State-Zip:	GONZALEZ FL 32560

Title	D
Name	NECAISE, GUS
Address	PO BOX 384
City-State-Zip:	GONZALEZ FL 32560

Title	D
Name	FREDERICK, PAUL
Address	PO BOX 384
City-State-Zip:	GONZALEZ FL 32560

Title	SECRETARY
Name	SUMMITT, GARY
Address	PO BOX 384
City-State-Zip:	GONZALEZ FL 32560

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: GARY SUMMITT**SECRETARY****03/26/2016**

Electronic Signature of Signing Officer/Director Detail

Date