

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N96000001326

**Entity Name:** CANTERBURY OAKS HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

7612 S. SHERRILL ST  
TAMPA, FL 33616

**FILED**  
**Feb 03, 2014**  
**Secretary of State**  
**CC6509478355**

**Current Mailing Address:**

7612 S. SHERRILL ST  
TAMPA, FL 33616 US

**FEI Number: 59-3434835**

**Certificate of Status Desired: No**

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

SYNERGY REAL ESTATE & A.M.S. CHUCK SCOGIN  
7612 S. SHERRILL ST.  
TAMPA, FL 33616 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 PD  
Name COPPERSMITH, TOM  
Address 5026 SYLVAN OAKS DRIVE  
City-State-Zip: VALRICO FL 33596

Title VP  
Name SINGER, KEITH  
Address 5028 SYLVAN OAKS DRIVE  
City-State-Zip: VALRICO FL 33596

Title S/T  
Name CANNON, DENISE  
Address 5014 SYLVAN OAKS DR  
City-State-Zip: VALRICO FL 33594

Title MANAGER  
Name SCOGIN, CHARLES L.  
Address 7612 S. SHERRILL ST  
City-State-Zip: TAMPA FL 33616

*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: CHARLES L. SCOGIN**

**MANAGER**

**02/03/2014**

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

\_\_\_\_\_  
Date