

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N99000002388

**Entity Name:** COPPERGATE ESTATES OWNERS ASSOCIATION, INC.

**FILED**  
**Apr 22, 2015**  
**Secretary of State**  
**CC5147588744**

**Current Principal Place of Business:**

C/O THE CAM TEAM INC.  
1008 PARK AVENUE  
ORANGE PARK, FL 32073

**Current Mailing Address:**

C/O THE CAM TEAM INC.  
1008 PARK AVENUE  
ORANGE PARK, FL 32073 US

**FEI Number: 59-3570387**

**Certificate of Status Desired: No**

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

MELTON, LINDA K  
C/O THE CAM TEAM 1008 PARK AVENUE  
ORANGE PARK, FL 32073 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 BRELAND, TROY  
Address 1008 PARK AVENUE  
City-State-Zip: ORANGE PARK FL 32073

Title VPD  
Name FERRELL, NANCY  
Address 1008 PARK AVENUE  
City-State-Zip: ORANGE PARK FL 32073

Title SD  
Name MORRISON, ANDREA  
Address 1008 PARK AVENUE  
City-State-Zip: ORANGE PARK FL 32073

Title TD  
Name GONZALEZ, LAURA  
Address 1008 PARK AVENUE  
City-State-Zip: ORANGE PARK FL 32073

*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: TROY BRELAND**

**PRESIDENT**

**04/22/2015**

Electronic Signature of Signing Officer/Director Detail

Date