

**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 18, 2005 08:00 AM
Secretary of State

DOCUMENT # 754172

1. Entity Name
COPPOLA VILLAS PROPERTY OWNERS ASSOCIATION,
INC.



Principal Place of Business
141 RIVERSIDE DR JUPITER
6-E
JUPITER, FL 33469

Mailing Address
C.U.P.O.A.
P.O. BOX 3501
JUPITER, FL 33469

DO NOT WRITE IN THIS SPACE



03152005 No Chg-NP CR2E037 (10/03)

4. FEI Number NOT APPLICABLE	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HUTCHINSON, ANDREW N
141 E. RIVERSIDE DRIVE
12-C
JUPITER, FL 33469

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MATHLEU, LAURIE 141 RIVERSIDE DR #9-A JUPITER, FL 33469
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD DORAN, CONNIE 141 E. RIVERSIDE DRIVE, #11-D JUPITER, FL 33469
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD HITCHSON, ANDREW 141 RIVERSIDE DR #12-6 JUPITER, FL 33469
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HITCHSON, VANESSA 141 RIVERSIDE DR #9C JUPITER, FL 33469
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

UN0000268781
03/18/05-80059-002 61.25

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Andrew Hutchinson

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/15/05 561-743-2801

Date

Daytime Phone #