

**2003 NOT-FOR-PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 14, 2003 8:00 am**  
**Secretary of State**

05-14-2003 90138 005 \*\*\*\*61.25

**DOCUMENT # 754172**

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



Principal Place of Business Mailing Address  
**141 RIVERSIDE DR JUPITER 141 RIVERSIDE DR JUPITER**  
**6-E 6-E**  
**JUPITER FL 33469 JUPITER FL 33469**

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number **NOT APPLICABLE** Applied For  
Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**



CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City **FL** Zip Code

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW: FEE IS \$61.25**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

**Make Check Payable to Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	<input type="checkbox"/> Delete
NAME	MATHLEU, LAURIE	
STREET ADDRESS	141 RIVERSIDE DR #9-A	
CITY-ST-ZIP	JUPITER FL 33469	
TITLE	SD	<input type="checkbox"/> Delete
NAME	DORAN, CONNIE	
STREET ADDRESS	141 E. RIVERSIDE DRIVE, #11-D	
CITY-ST-ZIP	JUPITER FL 33469	
TITLE	TD	<input type="checkbox"/> Delete
NAME	HITCHSON, ANDREW	
STREET ADDRESS	141 RIVERSIDE DR #12-6	
CITY-ST-ZIP	JUPITER FL 33469	
TITLE	LE	<input type="checkbox"/> Delete
NAME	DUNCAN, PATTY	
STREET ADDRESS	141 RIVERSIDE DE #10-D	
CITY-ST-ZIP	JUPITER FL 33469	
TITLE	VP	<input type="checkbox"/> Delete
NAME	HITCHSON, VANESSA	
STREET ADDRESS	141 RIVERSIDE DR #9C	
CITY-ST-ZIP	JUPITER FL 33469	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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: *SIGNATURE REQUIRED* 5/6/03 561-743-2801

CR2E037 (10/02)