

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 769901

FILED
Jan 20, 2009
Secretary of State

Entity Name: CANOPY LANE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2522 CAPITAL CIRCLE
TALLAHASSEE, FL 32308

New Principal Place of Business:

2522 CAPITAL CIRCLE N.E.
TALLAHASSEE, FL 32308

Current Mailing Address:

528 E. PARK AVENUE
TALLAHASSEE, FL 32301

New Mailing Address:

2522 CAPITAL CIRCLE N.E.
#16
TALLAHASSEE, FL 32308

FEI Number: 59-2327560

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ISAACS, DAN L
528 E. PARK AVENUE
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

JESTER, FRANCES E
2522 CAPITAL CIRCLE
#16
TALLAHASSEE, FL 32308 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: FRANCES E. JESTER

01/20/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DT () Delete
Name: MUSCATO, PAM
Address: 2522 CAPITAL CIRCLE NE #2
City-St-Zip: TALLAHASSEE, FL 32308

Title: D () Delete
Name: SHWARTZ, PHIL
Address: 2522 CAPITAL CIRCLE, NE #8
City-St-Zip: TALLAHASSEE, FL 32308

Title: DP () Delete
Name: BIONDI, RAY
Address: 2914 PRIMROSE LANE
City-St-Zip: TALLAHASSEE, FL 32301

Title: D () Delete
Name: ALTENBERG, JOSEPH
Address: 2522 CAPITAL CIRLE, NE #4
City-St-Zip: TALLAHASSEE, FL 32308

Title: D () Delete
Name: JESTER, FRAN
Address: 2522 CAPITAL CIRCLE, NE #16
City-St-Zip: TALLAHASSEE, FL 32308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: FRANCES JESTER

D

01/20/2009

Electronic Signature of Signing Officer or Director

Date