**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State

## FILED May 06, 1999 8:00 am Secretary of State

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1999	Several Property of the Control of t	DIVISION OF CORPOR	ATIONS	05-06-1999 90140 04:	2 ***150.00	
DOCUMENT # 1. Corporation Name COPEMAN BUILDERS,	=81454 INC.			r markan sing salar dan arang bisir ding dina	ni didir didir 81812 didir	ı <b>B</b> r <b>a</b> rı
Principal Place of Business	Mailir	ng Address				
5410 14TH STREET WEST BRADENTON FL 34207		14th Street West Enton FL 34207		DO NOT WRITE IN TH	IS SPACE	
			3.	Date Incorporated or Qualifed 05/14/1982		
2. Principal Place of Business	2a. M	ailing Address	4.	FEI Number	Applie	ed Fo
21	26			59-2210164	Not A	pplic
Suite, Apt. #, etc.	St 27	uite, Apt. #, etc.	5.	Certificate of Status Desired	\$8.75 Add Fee Requi	
City & State ·	28	ity & State	6.	Election Campaign Financing Trust Fund Contribution	<b>\$5.00</b> Ma Added to F	
	untry Zi	ρ Cour 30	ntry 8.	This corporation owes the current year I Personal Property Tax.		No.
	ddress of Current Register			Name and Address of New Registere	d Agent	
			81 Name			

COPEMAN, LARRY J 615 65TH ST. CT. NW **BRADENTON FL 34209** 

82	Street Ad	dress (P.	D. Box Num	ber is Not A	cceptable)			
83		, ,						
84	City					FI	85	Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Re	egistered Agent signature n	equired when reinstating)	DATE	
12.	OFFICERS AND DIRECTORS	(,,,,	13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTOR	RS IN 12
TITLE	PTS	DELETE	1.1 TITLE		☐ Change	Addition
NAME	COPEMAN, LARRY J.		1.2 NAME			
STREET ADDRESS	615 65TH ST. CT. NW		1,3 STREET ADDRESS			
CITY-ST-ZIP	BRADENTON, FL 00000		1,4 CfTY-ST-ZIP			
TITLE	V .	DELETE	2.1 TITLE		Change	☐ Addition
NAME	COPEMAN, CONNIE S.		2.2 NAME		*.	
STREET ADDRESS	615 65TH ST. CT. N. W.		2,3 STREET ADDRESS			
CITY-ST-ZIP	BRADENTON FL		2. 4 CITY-ST-ZIP			
TITLE		DELETE	3.1 TITLE		Change	Addition
NAME		i	3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CITY-ST-ZIP			
TITLE		DELETE	4.1 TITLE		☐ Change	Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		DELETE	5.1 TITLE		☐ Change	☐ Addition
NAME		I	5.2 NAME			
STREET ADDRESS		1	5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY- ST- ZIP			
TITLE		DELETE	6.1 TITLE		☐ Change	☐ Addition
NAME		İ	6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			6.4 CITY-ST-ZIP			

14. 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 annual report or supplemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapted, or on an attachment with an address, with all other like empowered.

SIGNATURE:

MING OFFICER OR DIRECTOR