

2002 UNIFORM BUSINESS REPORT (UBR)

0064711

DOCUMENT # N00000003497

1. Entity Name
COPELAND INDUSTRIAL PARK OWNERS ASSOCIATION, INC

Principal Place of Business Mailing Address
2012 W. UNIVERSITY AVE. P.O. BOX 14425
GAINESVILLE FL 32603 GAINESVILLE FL 32604

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 59-3664751 Applied For Not Applicable

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

6. Name and Address of Current Registered Agent

DELANEY, BRUCE D
UNIVERSITY OF FLORIDA FOUNDATION, INC.
2012 W. UNIVERSITY AVE.
GAINESVILLE FL 32603

7. Name and Address of New Registered Agent

Name Dexter O'Steen
Street Address (P.O. Box Number is Not Acceptable) 1006 SE 4th Street
City Gainesville FL Zip Code 32601

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.

SIGNATURE *[Signature]* DATE 5-6-02
(NOTE: Registered Agent signature required when reinstating)

FILE NOW:- FEE IS \$61.25

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

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DELANEY, BRUCE D 2012 W. UNIVERSITY AVE. GAINESVILLE FL 32603 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GOFFMAN, SUSAN G 2012 W. UNIVERSITY AVE. GAINESVILLE FL 32603 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ALBEKORD, KATHY 2012 W. UNIVERSITY AVE. GAINESVILLE FL 32603 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DEXTER O'STEEN 1006 SE 4th Street Gainesville, FL 32601 ☒ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRAD O'STEEN 1006 SE 4th Street Gainesville, FL 32601 ☒ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SARAJO O'STEEN 1006 SE 4th Street Gainesville, FL 32601 ☒ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LISA O'STEEN 1006 SE 4th Street Gainesville, FL 32601 ☒ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

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T. Lewis 5/8/02

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]* SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E037 (9/01)