

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000000917

FILED
Apr 29, 2005
Secretary of State

Entity Name: CANOPY, INC.

Current Principal Place of Business:

1723 MAHAN CENTER BLVD.
TALLAHASSEE, FL 32308

New Principal Place of Business:

Current Mailing Address:

1723 MAHAN CENTER BLVD.
TALLAHASSEE, FL 32308

New Mailing Address:

FEI Number: 59-3751145

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCELLIGOTT, JOHN
3070 HAWKS GLEN
TALLAHASSEE, FL 32308 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MULDER, LYNNE
Address: 2040 FARMS RD.
City-St-Zip: TALLAHASSEE, FL 32312

Title: D () Delete
Name: WATKINS, W. DAVID
Address: 1725 MAHAN DR., #201
City-St-Zip: TALLAHASSEE, FL 32308

Title: D () Delete
Name: FENTRISS, ANNA C
Address: 1018 THOMASVILLE RD.
City-St-Zip: TALLAHASSEE, FL 32303

Title: D () Delete
Name: MCELLIGOTT, JOHN
Address: 3070 HAWKS GLEN
City-St-Zip: TALLAHASSEE, FL 32312

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:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JOHN MCELLIGOTT

DIR

04/29/2005

Electronic Signature of Signing Officer or Director

Date