

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006864

FILED  
May 26, 2005  
Secretary of State

Entity Name: COPELAND CIVIC ASSOCIATION INC.

**Current Principal Place of Business:**

15331 JANES SCENIC DR.  
COPELAND, FL 34139

**New Principal Place of Business:**

**Current Mailing Address:**

P.O.BOX 95  
EVERGLADES, FL 34139

**New Mailing Address:**

FEI Number: 81-0567804      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

LAMP, KIMBERLY  
585 HARMON TERR.  
COPELAND, FL 34139      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: PD      ( ) Delete  
Name: MCDOWELL, DONALD  
Address: 226 OLD TRAIN LANE  
City-St-Zip: COPELAND, FL 34137

Title: VP      ( ) Delete  
Name: MOSHER, LARRY D  
Address: 511 WEBB RD  
City-St-Zip: COPELAND, FL 34137

Title: S      ( ) Delete  
Name: MOSHER, RANDETTE E  
Address: 511 WEBB RD  
City-St-Zip: COPELAND, FL 34137

Title: T      ( ) Delete  
Name: LEE, CARLA K  
Address: 211 SWAIN ST  
City-St-Zip: COPELAND, FL 34137

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD      (X) Change ( ) Addition  
Name: MCDOWELL, DONALD  
Address: 227 OLD TRAIN LANE  
City-St-Zip: COPELAND, FL 34137

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

Title: S      (X) Change ( ) Addition  
Name: STONE, ROBERTA  
Address: 226 OLD TRAIN LANE  
City-St-Zip: COPELAND, FL 34137

Title: T      (X) Change ( ) Addition  
Name: PARKER, ARITA  
Address: 247 SWAIN STREET  
City-St-Zip: COPELAND, FL 34137

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: ROBERTA STONE

S

05/26/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date