

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003312

FILED
Jan 18, 2012
Secretary of State

Entity Name: COPPER RIDGE MASTER ASSOCIATION, INC.

Current Principal Place of Business:

2941 DUNHILL CIRCLE
LAKELAND, FL 33810 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 209
KATHLEEN, FL 34849 US

New Mailing Address:

FEI Number: 20-2727415

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROB, DUARTE
8383 GREYSTONE DRIVE
LAKELAND, FL 33810 US

Name and Address of New Registered Agent:

GARY, VERRECCHIO PRES
2941 DUNHILL CIRCLE
LAKELAND, FL 33810 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: GARY VERRECCHIO

01/18/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: VERRECCHIO, GARY PRES
Address: 2941 DUNHILL CIRCLE
City-St-Zip: LAKELAND, FL 33810

Title: VP
Name: WILLIAMS, DAWN VICE P.
Address: 2727 BERKFORD CIRCLE
City-St-Zip: LAKELAND, FL 33810

Title: S
Name: LLORENS, LINDSAY SEC
Address: 8151 WOODVINE CIRCLE
City-St-Zip: LAKELAND, FL 33810

Title: T
Name: DRUARTE, ROB TRES
Address: 8383 GREYSTONE DRIVE
City-St-Zip: LAKELAND, FL 33810

Title: D
Name: MORGRAGE, BARRY DIR
Address: 8242 WESTMONT TERRACE DRIVE
City-St-Zip: LAKELAND, FL 33810

I hereby 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 all other like empowered.

SIGNATURE: ROBERT DUARTE

TRES

01/18/2012

Electronic Signature of Signing Officer or Director

Date