

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Nov 23, 2009
Secretary of State

DOCUMENT# N05000003859

Entity Name: COPPER OAKS HOMEOWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**C/O R&P PROPERTY MANAGEMENT
265 AIRPORT RD S
NAPLES, FL 34104**New Principal Place of Business:**MMI OF THE GULF COAST, INC.
3511 BONITA BAY BLVD., SUITE 1
BONITA SPRINGS, FL 34134**Current Mailing Address:**C/O R&P PROPERTY MANAGEMENT
265 AIRPORT RD S
NAPLES, FL 34104**New Mailing Address:**MMI OF THE GULF COAST, INC.
3511 BONITA BAY BLVD., SUITE 1
BONITA SPRINGS, FL 34134**FEI Number:** 20-2710693**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**R&P PROPERTY MANAGEMENT
265 AIRPORT RD S
NAPLES, FL 34104 US**Name and Address of New Registered Agent:**DEBOEST II, RICHARD D
2030 MCGREGOR BLVD.
FORT MYERS, FL 33901 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: RICHARD D. DEBOEST II

11/23/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** PD () Delete
Name: PEREZ, FRANCISCO
Address: 12895 SW 132ND STREET, #200
City-St-Zip: MIAMI, FL 33186**Title:** TD () Delete
Name: PEREDO, MICHAEL
Address: 12895 SW 132ND STREET, #200
City-St-Zip: MIAMI, FL 33186**Title:** SD () Delete
Name: AGUIRRE, ALEJANDRO
Address: 12895 SW 132ND STREET, #200
City-St-Zip: MIAMI, FL 33186**Title:** D () Delete
Name: GARCIA, WILLIAM
Address: 12895 SW 132ND STREET, #200
City-St-Zip: MIAMI, FL 33186**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 exemption stated in Chapter 119, 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: MICHAEL PEREDO

TD

11/23/2009

Electronic Signature of Signing Officer or Director

Date