

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000000224

FILED  
May 03, 2010  
Secretary of State

**Entity Name:** CANOPY ROAD HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

13475 MIDDLEFIELD ROAD  
TALLAHASSEE, FL 32309

**New Principal Place of Business:**

**Current Mailing Address:**

13475 MIDDLEFIELD ROAD  
TALLAHASSEE, FL 32309

**New Mailing Address:**

**FEI Number:** 20-8358501      **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:**

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

MANAUSA, DANIEL E  
3520 THOMASVILLE RD 4TH FLOOR  
TALLAHASSEE, FL 32309      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** D  
**Name:** THOMPSON, JAMES L  
**Address:** 13475 MIDDLEFIELD ROAD  
**City-St-Zip:** TALLAHASSEE, FL 32309

**Title:** D  
**Name:** THOMPSON, LEX C  
**Address:** 6863 PROCTOR ROAD  
**City-St-Zip:** TALLAHASSEE, FL 32308

**Title:** D  
**Name:** THOMPSON, CAROL A  
**Address:** 6863 PROCTOR ROAD  
**City-St-Zip:** TALLAHASSEE, FL 32308

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: JAMES L THOMPSON

MGRM

05/03/2010

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

\_\_\_\_\_  
Date