

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 17, 2006 8:00 am
Secretary of State

03-17-2006 90132 009 ****70.00

DOCUMENT # N18090			
1. Entity Name THE COPPER FOREST ESTATES HOMEOWNERS' ASSOCIATION, INC.			
Principal Place of Business C/O GAIL C. RAPPA 3213 COPPER RIDGE CIR CANTONMENT, FL 32533		Mailing Address C/O GAIL C. RAPPA 3213 COPPER RIDGE CIR CANTONMENT, FL 32533	
2. Principal Place of Business <i>C/O RICHARD C. KAMINSKA JR</i>		3. Mailing Address <i>C/O RICHARD C. KAMINSKA JR</i>	
Suite, Apt. #, etc. <i>3208 WINDMILL CIRCLE</i>		Suite, Apt. #, etc. <i>3208 WINDMILL CIRCLE</i>	
City & State <i>CANTONMENT, FL</i>		City & State <i>CANTONMENT, FL</i>	
Zip <i>32533</i>	Country <i>FLORIDA</i>	Zip <i>32533</i>	Country <i>FLORIDA</i>
4. FEI Number 59-2953016		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent RAPPA, GAIL T 3213 COPPER RIDGE CIR CANTONMENT, FL 32533		7. Name and Address of New Registered Agent Name <i>RICHARD C. KAMINSKA JR.</i> Street Address (P.O. Box Number is Not Acceptable) <i>3208 WINDMILL CIRCLE</i> City <i>CANTONMENT</i> FL Zip Code <i>32533</i>	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE <i>Richard C. Kaminska Jr.</i>		DATE <i>3-14-06</i>	
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ROBINSON, AMANDA 3260 WINDMILL CIR CANTONMENT, FL 32533 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD JOHN ED McDONALD 3213 WINDMILL CIRCLE CANTONMENT, FL 32533 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD DIXON, EDDIE 3288 WINDMILL CIR CANTONMENT, FL 32533 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD CINDY KELL 601 COPPER RIDGE DR. CANTONMENT, FL 32533 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD RAPPA, GAIL 3213 COPPER RIDGE CIRCLE CANTONMENT, FL 32533 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD RICHARD C. KAMINSKA JR. 3208 WINDMILL CIRCLE CANTONMENT, FL 32533 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <i>Richard C. Kaminska Jr.</i>		DATE: <i>3-14-06</i> 850/477-6481	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	