## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N38448

FILED Apr 03, 2005 Secretary of State

Entity Name: COOPER'S POND OWNER'S ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** LUTZ, FL 33548 US **Current Mailing Address: New Mailing Address:** PO BOX 22 LUTZ, FL 33548 US FEI Number: 59-3022590 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BECKER & POLIAKOFF, P.A. 5999 CENTRAL AVE SUITE 104 SAINT PETERSBURG, FL 33710 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change ( ) Addition () Delete GARMENDIA, MICHAEL KENNEDY, GEORFFEEY Name: Name: 2260 GROVELAND DRIVE Address: 2252 GROVELAND DRIVE Address: City-St-Zip: LUTZ, FL 33549 City-St-Zip: LUTZ, FL 33549 Title: ( ) Delete Title: () Change () Addition Name: AMBRAZ, PAUL Name: Address: 2247 GROVELAND DRIVE Address: City-St-Zip: LUTZ, FL 33549 City-St-Zip: Title: () Delete Title: () Change () Addition CISEK, ROBERT Name: Name: 2256 GROVELAND DR Address: Address: City-St-Zip: LUTZ. FL 33549 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition HECK, JULIE BARNETT, TERESA Name: Name: 2239 GROVELAND DRIVE 2220 GROVELAND DRIVE Address: Address: City-St-Zip: LUTZ, FL 33549 City-St-Zip: LUTZ, FL 33549 Title: () Delete Title: () Change () Addition MILLER, GARY Name: Name: 2228 GROVELAND DR Address: Address: City-St-Zip: LUTZ, FL 33549 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition CLARK, BONNIE BARBER, DAVID Name: Name: Address: 2256 GROVELAND DRIVE Address: 2224 GROVELAND DRIVE LUTZ, FL 33549 LUTZ, FL 33549 City-St-Zip: City-St-Zip:

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: TERESA BARNETT T 04/03/2005