

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48519

FILED  
Apr 10, 2008  
Secretary of State

Entity Name: NEW OPERATION COOPER STREET, INC.

**Current Principal Place of Business:**

650 MARY ST  
PUNTA GORDA, FL 33950 US

**New Principal Place of Business:**

**Current Mailing Address:**

650 MARY ST  
PUNTA GORDA, FL 33950 US

**New Mailing Address:**

FEI Number: 65-0329777      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

LYNCH, BRENDA  
650 MARY ST  
PUNTA GORDA, FL 33950 US

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

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: S ( ) Delete  
Name: KLEIN, DAVID  
Address: 1620 TAMiami TRIAL SUITE 101  
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: P ( ) Delete  
Name: MURPHY, JOHN  
Address: 834 PAMELA DR  
City-St-Zip: PUNTA GORDA, FL

Title: D ( ) Delete  
Name: KIAH, DONALD  
Address: 3818 WHIPPOORWILL BLVD.  
City-St-Zip: PUNTA GORDA, FL

Title: VP ( ) Delete  
Name: ANDREWS, ROBERT  
Address: 1530 SUZI STREET  
City-St-Zip: PUNTA GORDA, FL 33950

Title: T ( ) Delete  
Name: LYNCH, BRENDA  
Address: 103 W. MARION AVENUE  
City-St-Zip: PUNTA GORDA, FL 33950

Title: D ( ) Delete  
Name: ROGELIO, MANNING  
Address: 214 CASTILE CT.  
City-St-Zip: PUNTA GORDA, FL 33983

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: P (X) Change ( ) Addition  
Name: KIAH, DONALD DR.  
Address: 3818 WHIPPOORWILL BLVD.  
City-St-Zip: PUNTA GORDA, FL

Title: VP (X) Change ( ) Addition  
Name: THOMAS, ISAAC  
Address: 26372 ASUNCION DRIVE  
City-St-Zip: PUNTA GORDA, FL

Title: D (X) Change ( ) Addition  
Name: ANDREWS, ROBERT  
Address: 1530 SUZI STREET  
City-St-Zip: PUNTA GORDA, FL 33950

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: DONALD KIAH

PRES

04/10/2008

Electronic Signature of Signing Officer or Director

Date