

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # N50306

1. Entity Name
COPPER CREEK UNIT II HOMEOWNERS ASSOCIATION,
INC.



Principal Place of Business
1103 COOPER CREEK COURT
TALLAHASSEE, FL 32311 US
COPPER

Mailing Address
COPPER
1103 COOPER CREEK COURT
TALLAHASSEE, FL 32311 US

2. Principal Place of Business
1119 Copper Creek Court
Suite, Apt. #, etc.

3. Mailing Address
1119 Copper Creek Court
Suite, Apt. #, etc.

City & State
Tallahassee, FL
Zip 32311
Country USA

City & State
Tallahassee, FL
Zip 32311
Country USA

06142006 Chg-NP CR2E037 (4/06)

4. FEI Number
59-3315432
Applied For
Not Applicable

5. Certificate of Status Desired
\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SMITH, GERI L
1103 COOPER CREEK COURT
TALLAHASSEE, FL 32311

7. Name and Address of New Registered Agent

Name Smith, Susan L.
Street Address (P.O. Box Number is Not Acceptable)
1119 Copper Creek Ct

City Tallahassee FL Zip Code 32311

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 Susan L. Smith
Signature, typed or printed name of registered agent and id# if applicable.

(NOTE: Registered Agent signature required when reinstating)

8/24/06
DATE

**Filing Fee is \$61.25
Due by September 6, 2006**

9. Election Campaign Financing
Trust Fund Contribution. \$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 VSD
NAME FREEMAN, BETH
STREET ADDRESS 1031 COPPERCREEK DR
CITY-ST-ZIP TALLAHASSEE, FL 32311

Delete

TITLE P
NAME WOOD, ELEANOR H.
STREET ADDRESS 1093 COPPER CREEK COURT
CITY-ST-ZIP TALLAHASSEE FL 32311

Change Addition

TITLE D
NAME ROBINSON, GWEN
STREET ADDRESS 1109 COPPER CREEK CT.
CITY-ST-ZIP TALLAHASSEE, FL 32311

Delete

TITLE V
NAME HALLMARK, SALLIE
STREET ADDRESS 1111 COPPER CREEK COURT
CITY-ST-ZIP TALLAHASSEE FL 32311

Change Addition

TITLE TD
NAME YON, FRENCHIE
STREET ADDRESS 1087 COPPER CREEK CR
CITY-ST-ZIP TALLAHASSEE, FL 32311

Delete

TITLE S
NAME BORGES, GLADYS
STREET ADDRESS 1039 COPPER CREEK DRIVE
CITY-ST-ZIP TALLAHASSEE FL 32311

Change Addition

TITLE PD
NAME SMITH, GERI
STREET ADDRESS 1103 COPPER CREEK CT
CITY-ST-ZIP TALLAHASSEE, FL 32311

Delete

TITLE D
NAME SMITH, GERI
STREET ADDRESS 1103 COPPER CREEK COURT
CITY-ST-ZIP TALLAHASSEE FL 32311

Change Addition

TITLE D
NAME GERMAN, MAGDA
STREET ADDRESS 1037 COPPER CREEK DRIVE
CITY-ST-ZIP TALLAHASSEE, FL 32311

Delete

TITLE D
NAME GERSON, AARON
STREET ADDRESS 1086 COPPER CREEK DR
CITY-ST-ZIP TALLAHASSEE FL 32311

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

TITLE T
NAME SMITH, SUSAN
STREET ADDRESS 1119 COPPER CREEK COURT
CITY-ST-ZIP TALLAHASSEE FL 32311

Change 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: Susan L. Smith

8/24/06

922-9862

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

