## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N99000006134

FILED Jan 22, 2004 Secretary of State

Entity Name: COPPERHEAD COMMUNITY ASSOCIATION, INC. **Current Principal Place of Business: New Principal Place of Business:** 20910 COPPERHEAD DR LEHIGH ACRES, FL 33936 **Current Mailing Address: New Mailing Address:** 6001 EGAN DR SUITE 100 SAVAGE, MN 55378 FEI Number: 65-0986459 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: SNELL, MARY V SKILLESTAD, AMY E MRS 20910 COPPÉRHEAD DRIVE 1833 HENDRY STREET US LEHIGH ACRES, FL 33936 FORT MYERS, FL 33901 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: AMY E. SKILLESTAD 01/22/2004 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete ISRAELSON, WARREN J Name: Name: Address: 6001 EGAN DRIVE #100 Address: City-St-Zip: SAVAGE, MN 55378 City-St-Zip: Title: () Delete Title: () Change () Addition Name: ISRAELSON, KATHLEEN M Name: Address: 6001 EGAN DRIVE #100 Address: City-St-Zip: SAVAGE, MN 55378 City-St-Zip: Title: STD () Delete Title: () Change () Addition SKILLESTAD, AMY E Name: Name: Address: 6001 EGAN DRIVE SUITE 100 Address: City-St-Zip: SAVAGE, MN 55378 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: AMY E. SKILLESTAD STD 01/22/2004