

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000089085

FILED
Apr 25, 2006
Secretary of State

Entity Name: COPPERHILL PRODUCTIONS, INC.

Current Principal Place of Business:

9535 CYPRESS PARK WAY
BOYNTON BEACH, FL 33437

New Principal Place of Business:

655 LAKE WELLINGTON DR.
WELLINGTON, FL 33414

Current Mailing Address:

9535 CYPRESS PARK WAY
BOYNTON BEACH, FL 33437

New Mailing Address:

655 LAKE WELLINGTON DR.
WELLINGTON, FL 33414

FEI Number: 65-1042984

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, GARY S
9535 CYPRESS PARK WAY
BOYNTON BEACH, FL 33437 US

Name and Address of New Registered Agent:

JONES, GARY S
655 LAKE WELLINGTON DR.
WELLINGTON, FL 33414 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: _____

04/25/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: JONES, GARY S
Address: 9535 CYPRESS PARK WAY
City-St-Zip: BOYNTON BEACH, FL 33437

Title: VPS () Delete
Name: JONES, KAREN L
Address: 9535 CYPRESS PARK WAY
City-St-Zip: BOYNTON BEACH, FL 33437

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change () Addition
Name: JONES, GARY S
Address: 655 LAKE WELLINGTON DR.
City-St-Zip: WELLINGTON, FL 33414

Title: VPS (X) Change () Addition
Name: JONES, KAREN L
Address: 655 LAKE WELLINGTON DR.
City-St-Zip: WELLINGTON, FL 33414

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GARY S. JONES

PT

04/25/2006

Electronic Signature of Signing Officer or Director

Date