2006 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P02000060686

COOPER HOMES GROUP, INC.



FILED Feb 06, 2006 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

5223 HUNTERS RIDGE NEW PORT RICHEY, FL 34655 **5223 HUNTERS RIDGE NEW PORT RICHEY, FL 34655**



01092006

No Chg-P

CR2E034 (11/05)

4. FEI Number 20-1126897

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

COOPER, LEIGH R **5223 HUNTERS RIDGE**

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NEW PORT RICHEY, FL 34655			IN THIS SPACE		
	e named entity submits this statement for the patients of registered agent.	ourpose of changing its registere	ed office or r	egistered agent, or be	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered acent and title	if applicants (BYTTE Carifornia)	f finant sinoni.	required when rainstaling)	DATE
File NOWIII FEE IS \$150.00 After May 1, 2008 Feo will be \$550.00		Election Campaign Finan Trust Fund Contribution.		\$5.00 May Be Added to Fees	10000042074 5 02/15/06-80008-018 150.00
TO. TITLE NAME STREET ADDRESS CHY-ST-2IP RICE NAME STREET ADDRESS CHY-ST-2IP	PS COOPER, LEIGH R 5223 HUNTERS RIDGE NEW PORT RICHEY, FL 34655 VPS COOPER, DARREN J 5223 HUNTERS RIDGE NEW PORT RICHEY, FL 34685	PTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP					NOT WRITE THIS SPACE

12. I hereby certily that the information supplied with this tiling does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report on supplemental report is true and accurate and that my signature shalf 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 in Block 10 or Block 11 if changed, or on an attech nent with an address, with all other like empowered.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

Leigh R. Cooper