


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 17, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P02000114148</b>	
1. Entity Name COOPER PLAZA MANAGEMENT CO., INC.	

Principal Place of Business 1300 NORTH FEDERAL HIGHWAY SUITE 212 BOCA RATON, FL 33432	Mailing Address 1300 NORTH FEDERAL HIGHWAY SUITE 212 BOCA RATON, FL 33432
--	--

**DO NOT WRITE IN THIS SPACE**



01192004 No Chg-P CR2E034 (10/03)

4. FEI Number 32-0047300	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

SCHULTZ, AMY E  
1300 NORTH FEDERAL HIGHWAY  
SUITE 212  
BOCA RATON, FL 33432

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U00000090407 03/17/04-80015-025 150.00
---	---	---

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	D LINET, HARRY 1300 N. FEDERAL HWY #212 BOCA RATON, FL 33432
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D LINET, RHONDA 1300 N. FEDERAL HWY #212 BOCA RATON, FL 33432
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D THALER, MANLEY H 1300 N. FEDERAL HWY #212 BOCA RATON, FL 33432
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or as an attachment with an address, with all other two empowered.

SIGNATURE: Manley H Thaler 3/5/04  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #