

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 24, 2005 8:00 am
Secretary of State

01-24-2005 90040 027 ***150.00

DOCUMENT # P96000017917

1. Entity Name
COOPER LAND & TIMBER, INC.



Principal Place of Business
**2056 NE NEWBERRY DRIVE
ARCADIA, FL 34266**

Mailing Address
**2056 NE NEWBERRY DRIVE
ARCADIA, FL 34266**

40004824



01072005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0648204

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**COOPER, ESSIE E
2056 NE NEWBERRY DRIVE
ARCADIA, FL 34266**

**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

Essie E. Cooper **Sec. Treas**

1-12-2005

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	COOPER, WADE R
STREET ADDRESS	1991 OWENS AVE
CITY - ST - ZIP	ARCADIA, FL 34266
TITLE	ST
NAME	COOPER, ESSIE E
STREET ADDRESS	2056 NE NEWBERRY DRIVE
CITY - ST - ZIP	ARCADIA, FL 34266
TITLE	VP
NAME	COOPER, GARIT W
STREET ADDRESS	2086 FISH BRANCH RD.
CITY - ST - ZIP	ZOLFO SPRINGS, FL 33890

**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)(i), 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Essie E. Cooper

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-12-2005 863-494-0240

Date

Daytime Phone #