

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08000004181

**FILED**  
**Apr 29, 2014**  
**Secretary of State**  
**CC2405172633**

**Entity Name:** CANAL POINT COMMUNITY DEVELOPMENT, INC.

**Current Principal Place of Business:**

13542 US HIGHWAY 441  
CANAL POINT, FL 33438

**Current Mailing Address:**

13652 US HIGHWAY 441  
CANAL POINT, FL 33438 US

**FEI Number: 26-2536860**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

ERICKSON, KIMBERLY  
13542 US HIGHWAY 441  
CANAL POINT, FL 33438 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title T  
Name ERICKSON, KIMBERLY  
Address 13542 US HIGHWAY 441  
City-State-Zip: CANAL POINT FL 33438

Title V  
Name HAND, JOY  
Address 36911 THIRD STREET  
City-State-Zip: CANAL POINT FL 33438

Title P  
Name BROADBENT, DAVID  
Address 36981 THIRD STREET  
City-State-Zip: CANAL POINT FL 33438-0354

Title S  
Name DALE, ERICKSON  
Address 13538 US HIGHWAY 441  
City-State-Zip: CANAL POINT FL 33438

*I hereby 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 all other like empowered.*

**SIGNATURE: KIMBERLY ERICKSON**

**TREASURER**

**04/29/2014**

Electronic Signature of Signing Officer/Director Detail

Date