## 2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16000008419

Entity Name: COPPER CREEK VILLAS & CABINS AT DISNEY'S WILDERNESS

LODGE CONDOMINIUM ASSOCIATION, INC.

**FILED** Jan 29, 2018 Secretary of State CC1145509723

## **Current Principal Place of Business:**

1390 CELEBRATION BOULEVARD CELEBRATION, FL 34747

## **Current Mailing Address:**

1390 CELEBRATION BOULEVARD CELEBRATION, FL 34747 US

FEI Number: 81-3773005 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

CAPITOL CORPORATE SERVICES, INC. 515 EAST PARK AVENUE 2ND FL TALLAHASSEE, FL 32301 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:

Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title **DIRECTOR & PRESIDENT** Title DIRECTOR & VICE PRESIDENT

Name POTROCK, KENNETH M Name SAKASKE, SHANNON

1390 CELEBRATION BOULEVARD 1390 CELEBRATION BOULEVARD Address Address

CELEBRATION FL 34747 City-State-Zip: CELEBRATION FL 34747 City-State-Zip:

DIRECTOR, VICE PRESIDENT & Title DIRECTOR, VICE PRESIDENT & Title ASSISTANT SECRETARY **SECRETARY** 

Name

DHANANI, MAHMUD CHANG, YVONNE Name

1390 CELEBRATION BOULEVARD Address 1390 CELEBRATION BOULEVARD Address

City-State-Zip: CELEBRATION FL 34747 City-State-Zip: CELEBRATION FL 34747

Title VICE PRESIDENT & TREASURER Title DIRECTOR

Name SCHULTZ, TERRI A NIEMAN, LEIGH ANNE Name

Address 1390 CELEBRATION BOULEVARD 1390 CELEBRATION BOULEVARD Address

City-State-Zip: CELEBRATION FL 34747 City-State-Zip: CELEBRATION FL 34747

Title VICE PRESIDENT & ASSISTANT

TREASURER

Name HEALY, ELIZABETH

Address 1390 CELBRATION BOULEVARD

CELEBRATION FL 34747 City-State-Zip:

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: YVONNE CHANG DIRECTOR 01/29/2018