

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000007008

Entity Name: CANOPY ROADS CREW, INC.

Current Principal Place of Business:

84 FINNER DRIVE
CRAWFORDVILLE, FL 32327

Current Mailing Address:

5735 BRAVEHEART WAY
TALLAHASSEE, FL 32327

FEI Number: 59-3485454

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NAPPI, LYNNE
5735 BRAVEHEART WAY
TALLAHASSEE, FL 32327 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 PCD
Name NAPPI, R. MICHAEL
Address 5735 BRAVEHEART WAY
City-State-Zip: TALLAHASSEE FL 32317

Title VPD
Name WILSON, ELAINE
Address 2126 FAULK DR.
City-State-Zip: TALLAHASSEE FL 32303

Title T
Name NAPPI, LYNNE
Address 5735 BRAVEHEART WAY
City-State-Zip: TALLAHASSEE FL 32327

Title S
Name LAMMERT, JUDITH
Address 84 FINNER DRIVE
City-State-Zip: CRAWFORDVILLE FL 32327

Title AD
Name DOUGHERTY, KRISTINE
Address 1006 WAVERLY RD
City-State-Zip: TALLAHASSEE FL 32312

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: LYNNE NAPPI

TREASURER

04/03/2017

Electronic Signature of Signing Officer/Director Detail

Date