

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 09, 2000 8:00 am
Secretary of State

02-09-2000 90371 008 ****61.25

DOCUMENT # 746894

1. Entity Name

COVENTRY "E" CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

101 COVENTRY E
 101
 WEST PALM BEACH FL 33417
 US

102 COVENTRY E
 102
 WEST PALM BEACH FL 33417-1619
 US

00015593



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1641382

Applied For
 Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LADD, DOROTHY
 101 COVENTRY E
 W. PALM BEACH FL 33417

Name **MR. Ray Zollo**

Street Address (P.O. Box Number is Not Acceptable)

102 Coventry E

City **W.P.B.**

FL Zip Code **33417**

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.

SIGNATURE

Renaldo Zollo

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PD** ☒ Delete
 NAME **LADD, DOROTHY**
 STREET ADDRESS **101 COVENTRY E**
 CITY-ST-ZIP **W. PALM BEACH FL 33417-6761**

TITLE **PD** ☐ Change
 NAME **Zollo, RENALDO**
 STREET ADDRESS **102 Coventry E**
 CITY-ST-ZIP **W.P.B. FL 33417**

TITLE **VD** ☒ Delete
 NAME **ZOLLO, RENALDO**
 STREET ADDRESS **102 COVENTRY E**
 CITY-ST-ZIP **W. PALM BEACH FL 33417**

TITLE **Gustafson, Martha, VP** ☐ Change
 NAME **111 Coventry E**
 STREET ADDRESS **W.P.B. FL 33417**
 CITY-ST-ZIP

TITLE **VD** ☐ Delete
 NAME **RYKON, IRVING**
 STREET ADDRESS **114 COVENTRY E**
 CITY-ST-ZIP **W. PALM BEACH FL 33417**

TITLE **Irving Rykon - Board Member** ☒ Change
 NAME **114 Coventry E**
 STREET ADDRESS **W.P.B. FL 33417**
 CITY-ST-ZIP

TITLE **ST** ☒ Delete
 NAME **MORRIS, ISABELLE**
 STREET ADDRESS **104 COVENTRY E**
 CITY-ST-ZIP **W. PALM BEACH FL 33417**

TITLE **LEVINE PHILOMENA** ☐ Change
 NAME **113 COVENTRY-E**
 STREET ADDRESS **W.P.B. FL 33417**
 CITY-ST-ZIP

TITLE **TT** ☒ Delete
 NAME **LADD, ARTHUR**
 STREET ADDRESS **101 COVENTRY E**
 CITY-ST-ZIP **W. PALM BEACH FL 33417**

TITLE **Nichols, Philomena M** ☐ Change
 NAME **98 Coventry E**
 STREET ADDRESS **W.P.B. FL 33417**
 CITY-ST-ZIP

TITLE **T** ☒ Delete
 NAME **BURKHARDT, ADOLPH**
 STREET ADDRESS **119 COVENTRY E**
 CITY-ST-ZIP **W. PALM BEACH FL 33417**

TITLE **Fiess, Fay, Board member** ☐ Change
 NAME **118 Coventry E**
 STREET ADDRESS **W.P.B. FL 33417**
 CITY-ST-ZIP

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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Renaldo Zollo 1/6/00 1-561-686-71
 Date Daytime Phone #