

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

APPROVED
AND
FILED



CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Morgan
Secretary of State
DIVISION OF CORPORATIONS

1995 APR 25 PM 1:22

STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N94000000862

1. Corporation Name

The Homes at Coventry Village H.O.A., Inc.

Principal Place of Business
c/o Sunstate Accounting

Mailing Address
P.O. Box 1191
Oldsmar, Fl. 34677

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
May 94

3a. Date of Last Report
unknown

4. FEI Number
59-3233525

Applied For
Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

2b City & State

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing

\$5.00 May Be

23 City & State

2b City & State

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

\$68.75 Supplemental
Fee Not Required

24 Zip

25 Country

29 Zip

30 Country

8. This corporation has liability for intangible tax under S. 199.032.
Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name Jerry Wicky

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

83 21 Lafayette Blvd.

84 City Oldsmar,

FL 85 Zip Code 34677

11. Pursuant to the provisions of Sections 807.0502 and 807.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 807.0505, Florida Statutes.

SIGNATURE x Jerry Wicky/
Signature, typed or printed name of registered agent and title if appropriate.

(NOTE: Registered Agent signature required when renewing)

DATE 3/23/95

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D/ Jerry Wicky
NAME
STREET ADDRESS 221 Lafayette Blvd.
CITY - ST - ZIP Oldsmar, Fl. 34677

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

TITLE T/ Gail Hidalgo
NAME
STREET ADDRESS 107 Dunbar Ave. #1
CITY - ST - ZIP Oldsmar, Fl. 34677

2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

TITLE T/ Andy Berger
NAME
STREET ADDRESS 107 Dunbar Ave. #1
CITY - ST - ZIP Oldsmar, Fl. 34677

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(4), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 817, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: x/ Jerry Wicky

SIGNATURE AND TYPED OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR

DATE 3/23/95

DATE

813-855-9546

DAYTIME PHONE #