

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 733056

FILED  
Jan 08, 2009  
Secretary of State

**Entity Name:** COVENTRY GARDENS HOMEOWNERS ASSOCIATION, INC

**Current Principal Place of Business:**

2855 N. UNIVERSITY DR  
SUITE 310  
CORAL SPRINGS, FL 33065 US

**New Principal Place of Business:**

**Current Mailing Address:**

2855 N. UNIVERSITY DR  
SUITE 310  
CORAL SPRINGS, FL 33065 US

**New Mailing Address:**

**FEI Number:** 59-2606840

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TUCKER&TIGHE, P.A.  
800 E BROWARD BLVD  
SUITE 710  
FORT LAUDERDALE, FL 33301 US

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

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

**OFFICERS AND DIRECTORS:**

Title: S ( ) Delete  
Name: VORHIES, SHERI  
Address: 6601 WINFIELD BLVD  
City-St-Zip: MARGATE, FL 33063

Title: PD ( ) Delete  
Name: ROBERTS, BRANDT  
Address: 6605 WINFIELD BLVD  
City-St-Zip: MARGATE, FL 33063

Title: VPD ( ) Delete  
Name: VOIGT, JIM  
Address: 6627 WINFIELD BLVD  
City-St-Zip: MARGATE, FL 33063

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: VORHIES, SHERI  
Address: 6601 WINFIELD BLVD  
City-St-Zip: MARGATE, FL 33063

Title: TD (X) Change ( ) Addition  
Name: KOHLE, ANNETTE  
Address: WINFIELD BLVD  
City-St-Zip: MARGATE, FL 33063

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: SD ( ) Change (X) Addition  
Name: SCHNEIDER, MAREK  
Address: WINFIELD BLVD  
City-St-Zip: MARGATE, FL 33063

Title: BD ( ) Change (X) Addition  
Name: ANDRES, NAOMI  
Address: WINFIELD BLVD  
City-St-Zip: MARGATE, FL 33063

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: SHERI VORHIES

P

01/08/2009

Electronic Signature of Signing Officer or Director

Date