

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Aug 16, 2006 8:00 am
Secretary of State

08-16-2006 90002 007 ****61.25

DOCUMENT # 742757

1. Entity Name

COVENTRY F CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

Mailing Address

CENTURY VILLAGE
121 105 COVENTRY F
WEST PALM BEACH FL 33417
US

121 105 COVENTRY F
WEST PALM BEACH FL 33417
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1838585

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

2nd MOORE

CR2E037 (4/06)



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

VIRGINIA R. HOWARD

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

121 COVENTRY F

City

WEST PALM BEACH

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Virginia R. Howard

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

(NOTE: Registered Agent signature required when reconstituting)

DATE

8-9-06

FILE NOW: FEE IS \$61.25
Due By September 6, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE: *PS VP/T*
NAME: HOWARD, VIRGINIA R
STREET ADDRESS: 121 105 COVENTRY F
CITY-ST-ZIP: WEST PALM BEACH FL 33417 ☐ Delete

TITLE: *TD*
NAME: LEFFLBINE, HAROLD J
STREET ADDRESS: 135 COVENTRY F
CITY-ST-ZIP: W. PALM BEACH FL 33417 ☒ Delete

TITLE: *D*
NAME: JONES, MAUDE
STREET ADDRESS: 129 COVENTRY F
CITY-ST-ZIP: WEST PALM BEACH FL 33417 ☐ Delete

TITLE: *P/S*
NAME: JEFF CAPPELL
STREET ADDRESS: 132 COVENTRY F
CITY-ST-ZIP: WEST PALM BEACH, FL 33417 ☐ Delete

TITLE: *S*
NAME: SHIRLEY BURKE
STREET ADDRESS: 124 COVENTRY F
CITY-ST-ZIP: WEST PALM BEACH, FL 33417 ☐ Delete

TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:
☐ Change ☐ Addition

TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:
☐ Change ☐ Addition

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TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Virginia R. Howard

8-9-06

561-478-2074