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Jul 31 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 763525 (3)

1. Corporation Name

COVENTRY GREEN, HOLIDAY HILL ESTATES CIVIC ASSOCIATION, INC.

Principal Place of Business

Mailing Address

PO BOX 6081
HUDSON FL 34674

PO BOX 6081
HUDSON FL 34674-6081



2. Principal Place of Business

21 PO Box 6081

Suite, Apt. #, etc.

22 City & State

23 Hudson, FL

Zip

24 34674

Country

25 PASCO

2a. Mailing Address

26 PO Box 6081

Suite, Apt. #, etc.

27 City & State

28 Hudson, FL

Zip

29 34674-6081

Country

30 PASCO

3. Date Incorporated or Qualified
06/02/1982

3a. Date of Last Report
04/02/1996

4. FEI Number

59-3142553

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be Added to Fees

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

MCCARTNEY, PAUL J
10900 QUEENS ROAD
PORT RICHEY FL 34688

81 Name

F. MICHAEL YEALY

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

7609 LANCELOT RD

83

84 City

PORT RICHEY

FL

85 Zip Code

34668

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE F. MICHAEL YEALY PR.

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

(NOTE: Registered Agent signature required when reappointing)

DATE

4-24-97

12. OFFICERS AND DIRECTORS

TITLE PD DELETE

NAME MCCARTNEY, PAUL J
STREET ADDRESS 10900 QUEENS RD.
CITY-ST-ZIP PT RICHEY FL

TITLE VPD DELETE

NAME LATWINAS, TOM
STREET ADDRESS 7308 COVENTRY DR.
CITY-ST-ZIP PT RICHEY FL

TITLE SD DELETE

NAME QUINN, CAROLYN
STREET ADDRESS 7603 LANCELOT RD.
CITY-ST-ZIP PT RICHEY FL

TITLE TD DELETE

NAME LENELL, DOLORES
STREET ADDRESS 7300 COVENTRY DR.
CITY-ST-ZIP PT RICHEY FL

TITLE D DELETE

NAME FLANNERY, LORRAINE
STREET ADDRESS 7808 COVENTRY DRIVE
CITY-ST-ZIP PORT RICHEY FL

TITLE D DELETE

NAME OTTO, HELEN
STREET ADDRESS 7524 LANCELOT ROAD
CITY-ST-ZIP PT RICHEY FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD Change Addition

1.2 NAME F. MICHAEL YEALY
1.3 STREET ADDRESS 7609 LANCELOT RD
1.4 CITY-ST-ZIP PORT RICHEY FL.

2.1 TITLE VPD Change Addition

2.2 NAME PAUL MEYERS
2.3 STREET ADDRESS 7540 CAMELOT RD.
2.4 CITY-ST-ZIP PORT RICHEY FL.

3.1 TITLE SD Change Addition

3.2 NAME DIANE MEYERS
3.3 STREET ADDRESS 7540 CAMELOT RD.
3.4 CITY-ST-ZIP PORT RICHEY FL.

4.1 TITLE TD Change Addition

4.2 NAME PAUL MCCARTNEY
4.3 STREET ADDRESS 10900 QUEENS RD
4.4 CITY-ST-ZIP PORT RICHEY FL

5.1 TITLE D Change Addition

5.2 NAME SAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE D Change Addition

6.2 NAME GLORIA GOLDMAN
6.3 STREET ADDRESS 10741 BRIDLETON RD
6.4 CITY-ST-ZIP PORT RICHEY FL.

14. I do 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 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

CR2E037 (9/96)