

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009351

FILED
Apr 12, 2007
Secretary of State

Entity Name: COVENTRY AT STRATFORD PLACE SECTION I CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O INTEGRATED PROPERTY MGMT.
3435-10TH STREET N., # 201
NAPLES, FL 34103

New Principal Place of Business:

C/O ABILITY MANAGEMENT INC
6312 TRAIL BLVD
NAPLES, FL 34108

Current Mailing Address:

C/O INTEGRATED PROPERTY MGMT.
3435-10TH STREET N., # 201
NAPLES, FL 34103

New Mailing Address:

C/O ABILITY MANAGEMENT INC
PO BOX 770278
NAPLES, FL 34107

FEI Number: 20-1036676

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STACKHOUSE, EDWIN D
%PULTE HOME CORPORATION
9148 BONITA BEACH RD, STE 102
BONITA SPRINGS, FL 34135 US

Name and Address of New Registered Agent:

LIVELY, DENNIS
6312 TRAIL BLVD
NAPLES, FL 34108 US

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: DENNIS LIVELY

04/12/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: CIBLEY, JERRY
Address: 1440 TIFFANY LANE 2803
City-St-Zip: NAPLES, FL 34105

Title: DVS () Delete
Name: GREENLEE, GARY
Address: 1415 TIFFANY LANE 1305
City-St-Zip: NAPLES, FL 34105

Title: DVT () Delete
Name: WILBURN, BRANDEN
Address: 1455 TIFFANY LANE 105
City-St-Zip: NAPLES, FL 34105

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: CIBLEY, JERRY
Address: 17 INDEPENDENCE DRIVE
City-St-Zip: FOXBORO, MA 02035

Title: D (X) Change () Addition
Name: GREENLEE, GARY
Address: 1415 TIFFANY LANE 1305
City-St-Zip: NAPLES, FL 34105

Title: D (X) Change () Addition
Name: WILBURN, BRANDEN
Address: 1455 TIFFANY LANE 105
City-St-Zip: NAPLES, FL 34105

I hereby certify that the information supplied with this filing does not qualify for the 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: JERRY CIBLEY

DP

04/12/2007

Electronic Signature of Signing Officer or Director

Date