## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000009351

Apr 24, 2009 Secretary of State

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

**Current Principal Place of Business: New Principal Place of Business:** 6736 LONE OAK BLVD C/O RESORT MANAGEMENT NAPLES, FL 341096834 2685 HORSESHOE DR S #215 NAPLES, FL 34104 **Current Mailing Address:** New Mailing Address: C/O RESORT MANAGEMENT 6736 LONE OAK BLVD 2685 HORSESHOE DR S #215 NAPLES, FL 341096834 NAPLES, FL 34104 FEI Number: 20-1036676 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of New Registered Agent: Name and Address of Current Registered Agent: LIVELY, DENNIS GREENLEE, GARY 6736 LÓNE OAK BLVD 1415 TIFFANY LANE #1305 NAPLES, FL 341096834 US NAPLES, FL 34105 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: GARY GREENLEE 04/24/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete GREENLEE, GARY Name: Name: 1415 TIFFANY LANE 1305 Address: Address: City-St-Zip: NAPLES, FL 34105 City-St-Zip: Title: VST () Delete Title: (X) Change ( ) Addition Name: WILBURN, BRANDEN Name: WILBURN, BRANDEN Address: 1455 TIFFANY LANE 105 Address: 1455 TIFFANY LANE 105 City-St-Zip: NAPLES, FL 34105 City-St-Zip: NAPLES, FL 34105 Title: () Delete Title: ( ) Change (X) Addition CHANDRASKARAN, SATISH Name: Name: 1415 TIFFANY LANE #1302 Address: Address: City-St-Zip: City-St-Zip: NAPLES, FL 34105

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: GARY GREENLEE P 04/24/2009