

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009354

FILED
Apr 15, 2009
Secretary of State

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

Current Principal Place of Business:

C/O RESORT MGMT
2685 HORSESHOE DR S #215
NAPLES, FL 34104

New Principal Place of Business:

Current Mailing Address:

C/O RESORT MGMT
2685 HORSESHOE DR S #215
NAPLES, FL 34104

New Mailing Address:

FEI Number: 20-1036707

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHADLE, RICHARD D
1365 HENLEY ST #502
NAPLES, FL 34105 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: PS () Delete
Name: SHADLE, DENNIS
Address: 1365 HENLEY ST., #502
City-St-Zip: NAPLES, FL 34105

Title: VS () Delete
Name: O'LEARY, LAWRENCE
Address: 1375 HENLEY STREET, #402
City-St-Zip: NAPLES, FL 34105

Title: D () Delete
Name: CALIGUIRE, RICHARD D
Address: 1375 HENLEY ST #403
City-St-Zip: NAPLES, FL 34105

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change () Addition
Name: SHADLE, DENNIS
Address: 1365 HENLEY ST., #502
City-St-Zip: NAPLES, FL 34105

Title: VPS (X) Change () Addition
Name: O'LEARY, LAWRENCE
Address: 1375 HENLEY STREET, #402
City-St-Zip: NAPLES, FL 34105

Title: D (X) Change () Addition
Name: CALIGUIRE, THOMAS J
Address: 1375 HENLEY ST #403
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: RICHARD SHADLE

PT

04/15/2009

Electronic Signature of Signing Officer or Director

Date