

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 24, 2006
Secretary of State**

DOCUMENT# N04000007380

Entity Name: CARDEL VILLAS AT COVINGTON ASSOCIATION, INC.

Current Principal Place of Business:

3434 COLWELL AVENUE
SUITE 200
TAMPA, FL 33614

New Principal Place of Business:

Current Mailing Address:

3434 COLWELL AVENUE
SUITE 200
TAMPA, FL 33614

New Mailing Address:

FEI Number: 20-2339919 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RIZZETTA & COMPANY, INCORPORATED
3434 COLWELL AVENUE
SUITE 200
TAMPA, FL 33614 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: P () Delete
Name: MICKELBERRY, ROD
Address: 8804 SHALLOW CREEK LANE
City-St-Zip: RIVERVIEW, FL 33569

Title: VP () Delete
Name: SUMMERS, JEFF
Address: 8804 SHALLOW CREEK LANE
City-St-Zip: RIVERVIEW, FL 33569

Title: ST () Delete
Name: HOLLMAN, KENT
Address: 8804 SHALLOW CREEK LANE
City-St-Zip: RIVERVIEW, FL 33569

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P-D (X) Change () Addition
Name: MICKELBERRY, ROD
Address: 8804 SHALLOW CREEK LANE
City-St-Zip: RIVERVIEW, FL 33569

Title: VP-D (X) Change () Addition
Name: SUMMERS, JEFF
Address: 8804 SHALLOW CREEK LANE
City-St-Zip: RIVERVIEW, FL 33569

Title: ST-D (X) Change () Addition
Name: HOLLMAN, KENT
Address: 8804 SHALLOW CREEK LANE
City-St-Zip: RIVERVIEW, FL 33569

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: ROD MICKELBERRY

P-D

04/24/2006

Electronic Signature of Signing Officer or Director

Date