



# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 14, 2007 8:00 am**  
**Secretary of State**

05-14-2007 90074 031 \*\*\*\*61.25

<b>DOCUMENT # N06000004256</b>					
<b>1. Entity Name</b> COVENT GARDEN AT TWINEAGLES SECTION I CONDOMINIUM ASSOCIATION, INC.					
<b>Principal Place of Business</b> % PULTE HOME CORPORATION 9148 BONITA BEACH RD - STE 102 BONITA SPRINGS, FL 34135			<b>Mailing Address</b> % PULTE HOME CORPORATION 9148 BONITA BEACH RD - STE 102 BONITA SPRINGS, FL 34135		
<b>2. Principal Place of Business - No P.O. Box #</b> c/o Pulte Home Corporation		<b>3. Mailing Address</b> c/o Pulte Home Corporation			
Suite, Apt. #, etc. <b>9240 Estero Park Commons Blvd.</b>		Suite, Apt. #, etc. <b>9240 Estero Park Commons Blvd.</b>			
City & State <b>Estero, FL</b>		City & State <b>Estero, FL</b>			
Zip <b>33928</b>	Country	Zip <b>33928</b>	Country	<b>4. FEI Number</b> <b>20-5799114</b>	
<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				Applied For Not Applicable	
<b>6. Name and Address of Current Registered Agent</b> STACKHOUSE, EDWIN D % PULTE HOME CORPORATION 9148 BONITA BEACH RD - STE 102 BONITA SPRINGS, FL 34135			<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) <b>9240 Estero Park Commons Blvd.</b> City <b>Estero, FL</b> <b>FL</b> Zip Code <b>33928</b>		
<b>8. 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. I am familiar with, and accept the obligations of registered agent.</b>					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>Filing Fee is \$61.25 Due by May 1, 2007</b>		<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		<b>Make check payable to Florida Department of State</b>	
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD STACKHOUSE, EDWIN D <input type="checkbox"/> Delete %PULTE HOME CORP-9148 BONITA BEACH RD-#102 BONITA SPRINGS, FL 34135	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Change <input type="checkbox"/> Addition Stackhouse, Edwin D % Pulte Home-9240 Estero Park Com. Blvd. Estero, FL 33928		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD <input type="checkbox"/> Delete MCCORMICK, RICHARD %PULTE HOME CORP-9148 BONITA BEACH RD-#102 BONITA SPRINGS, FL 34135	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV <input type="checkbox"/> Change <input type="checkbox"/> Addition McCormick, Richard % Pulte Home-9240 Estero Park Com. Blvd. Estero, FL 33928		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD <input type="checkbox"/> Delete RAY, LAURA %PULTE HOME CORP-9148 BONITA BEACH RD-#102 BONITA SPRINGS, FL 34135	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST <input type="checkbox"/> Change <input type="checkbox"/> Addition Ray, Laura % Pulte Home-9240 Estero Park Com. Blvd. Estero, FL 33928		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
<b>12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like information.</b>					
<b>SIGNATURE:</b> 		Date <b>4-10-07</b>		Daytime Phone # <b>339.475.4829</b>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR <b>EDWIN D. STACKHOUSE</b>					