

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 12, 2007 8:00 am
Secretary of State

03-12-2007 90107 005 ****61.25

DOCUMENT # N10741

1. Entity Name
COVENTRY OWNERS ASSOCIATION, INC.



Principal Place of Business
**1700 BOLTON ABBEY DRIVE
JACKSONVILLE, FL 32223 US**

Mailing Address
**1700 BOLTON ABBEY DRIVE
JACKSONVILLE, FL 32223 US**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02142007 Chg-NP CR2E037 (12/06)

4. FEI Number
59-2761556

Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**TOBIAS, HUGH
14248 MIDDLEHAM LANE
JACKSONVILLE, FL 32223**

Name
Laurie Capece
Street Address (P.O. Box Number is Not Acceptable)
1788 Bolton Abbey Drive

City
Jacksonville **FL** Zip Code **32223**

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.

SIGNATURE

Laurie Capece

Laurie Capece

2-16-07

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CARVEL, DEBORAH 1771 BOLTON ABBEY DRIVE JACKSONVILLE, FL 32223	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SHAFFER, LESLEY 1777 BOLTON ABBEY DRIVE JACKSONVILLE, FL 32223	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S STRAUB, MARCIA 1813 GRASSINGTON WAY NORTH JACKSONVILLE, FL 32223	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T TOBIAS, HUGH 14248 MIDDLEHAM LANE JACKSONVILLE, FL 32223	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WINSOTT, DAVID 1764 BOLTON ABBEY DRIVE JACKSONVILLE, FL 32223	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RAZAVIPOUR, PEYMAN 1776 BOLTON ABBEY DRIVE JACKSONVILLE, FL 32223	☒ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	President James E Wilson 1829 Bolton Abbey Drive Jacksonville FL 32223	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Gerry Geddings 14264 Hawksmore Lane Jacksonville FL 32223	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Gail Parson 1777 Bolton Abbey Drive Jacksonville FL 32223	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasure Laurie Capece 1788 Bolton Abbey Drive Jacksonville FL 32223	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Gilbert Alonso 1735 Bolton Abbey Drive Jacksonville FL 32223	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Ernie Walton 14277 Hawksmore Lane Jacksonville FL 32223	☐ Change ☒ Addition

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 empowered.

SIGNATURE:

James E Wilson President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

February 14, 2007

Date

904 260 0626

Daytime Phone #