

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37769

FILED
Apr 26, 2006
Secretary of State

Entity Name: THE COACH HOMES AT DOVER VILLAGE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2180 W S.R. 434, SUITE 5000
LONGWOOD, FL 32779

New Principal Place of Business:

1350 ORANGE AVE
STE 100
WINTER PARK, FL 32789

Current Mailing Address:

2180 W S.R. 434, SUITE 5000
LONGWOOD, FL 32779

New Mailing Address:

1350 ORANGE AVE
STE 100
WINTER PARK, FL 32789

FEI Number: 59-3039870

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HART, JAMES, W, JR
SENTRY MANAGEMENT, INC.
2180 W. STATE RD. 434, SUITE 5000
LONGWOOD, FL 32779 US

Name and Address of New Registered Agent:

ATTWOOD-PHILLIPS, INC.
1350 ORANGE AVE
STE 100
WINTER PARK, FL 32789 US

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: ROGER V. PHILLIPS

04/26/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MCNICOL, RON
Address: 5282-7 TUNBRIDGE WELLS LN
City-St-Zip: ORLANDO, FL 32812

Title: VPD () Delete
Name: BRACERO, JOSEPH
Address: 5282-3 TUNBRIDGE WELLS LN
City-St-Zip: ORLANDO, FL 32812

Title: STD () Delete
Name: CAUDELL, CAROL
Address: 5258-2 TUNBRIDGE WELLS LANE
City-St-Zip: ORLANDO, FL 32812

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DESALVO, DORENA
Address: 5301-6 DOVER VILLAGE LN
City-St-Zip: ORLANDO, FL 32812

Title: TD (X) Change () Addition
Name: WARD, JANET G
Address: 5274-1 TUNBRIDGE WELLS LN
City-St-Zip: ORLANDO, FL 32812

Title: SD (X) Change () Addition
Name: LEONE, MELODY J
Address: 4415 HURD AVE
City-St-Zip: ORLANDO, FL 32812

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: DORENA DESALVO

PD

04/26/2006

Electronic Signature of Signing Officer or Director

Date