## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# N9400000863

FILED Apr 21, 2003 Secretary of State

Entity Name: THE VILLAS AT COVENTRY VILLAGE HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 4151 WOODLANDS PARKWAY PALM HARBOR, FL 34685 **Current Mailing Address: New Mailing Address:** 4151 WOODLANDS PARKWAY PALM HARBOR, FL 34685 US FEI Number: 59-3233529 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: REARDON, MAUREEN C 4151 WOODLANDS PARKWAY PALM HARBOR, FL 34685 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition VLASBLOM, CHARYL ROBERTS, RALPH Name: Name: 4409 CONNERY CT Address: 5773 YORKSHIRE LANE Address: City-St-Zip: PALM HARBOR, FL 34685 City-St-Zip: PALM HARBOR, FL 34684 (X) Change ( ) Addition Title: Title: ( ) Delete TROWBRIDGE, DOUG Name: ROSEN, SHIRL Name: Address: 5775 YORKSHIRE Address: 5774 YORKSHIRE LANE City-St-Zip: PALM HARBOR, FL 34685 City-St-Zip: PALM HARBOR, FL 34684 Title: () Delete Title: SD (X) Change ( ) Addition IMPERIALE, STEVE MACHADO, JIM Name: Name: 4473 CONNERY CT Address: 4467 CONNERY CT Address: City-St-Zip: PALM HARBOR, FL 34685 City-St-Zip: PALM HARBOR, FL 34684 ( ) Delete Title: Title: ( ) Change (X) Addition Name: Name: VAIDEN, FRANK Address: Address: 4437 CONNERY COURT City-St-Zip: City-St-Zip: PALM HARBOR, FL 34684

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: RALPH ROBERTS PD 04/21/2003