

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 11, 2006 8:00 am**  
**Secretary of State**

04-11-2006 90111 050 \*\*\*\*70.00

**DOCUMENT # N94000005583**

1. Entity Name

COVENTRY AT WOODFIELD COUNTRY CLUB, INC.



Principal Place of Business

LANG MGT CO  
21045 COMMERCIAL TRAIL  
BOCA RATON FL 33486

Mailing Address

LANG MGT CO  
21045 COMMERCIAL TRAIL  
BOCA RATON FL 33486



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

65-0551792

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

ISAACSON, WILLIAM K  
21045 COMMERCIAL TRAIL  
BOCA RATON FL 33486

7. Name and Address of New Registered Agent

Name Isaacson, William K.

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when re-stating)

DATE

**FILE NOW: FEE IS \$61.25  
Due By May 1, 2006**

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

TITLE P ☒ Delete  
NAME KUPFERBERG, BARRY  
STREET ADDRESS 3767 COVENTRY LN  
CITY-ST-ZIP BOCA RATON FL 33496

TITLE D ☐ Delete  
NAME LISSAUER, JOANNE  
STREET ADDRESS 3798 COVENTRY LANE  
CITY-ST-ZIP BOCA RATON FL 33496

TITLE VPD ☒ Delete  
NAME CONKLING, STEVE  
STREET ADDRESS 3763 COVENTRY LANE  
CITY-ST-ZIP BOCA RATON FL 33496

TITLE SD ☒ Delete  
NAME CONEN, ILREN  
STREET ADDRESS 3762 NW 65TH LN  
CITY-ST-ZIP BOCA RATON FL 33496

TITLE D ☐ Delete  
NAME SILVERMAN, HOWARD  
STREET ADDRESS 3805 NW 65TH LANE  
CITY-ST-ZIP BOCA RATON FL 33496

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE Treasurer ☐ Change ☒ Addition  
NAME Mitchell Kaminsky  
STREET ADDRESS 3801 Coventry Lane  
CITY-ST-ZIP Boca Raton, FL 33496

TITLE VP ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE Secretary ☐ Change ☒ Addition  
NAME Mindy Meade  
STREET ADDRESS 3772 Coventry Lane  
CITY-ST-ZIP Boca Raton, FL 33496

TITLE Director ☐ Change ☒ Addition  
NAME Ben Goldstein  
STREET ADDRESS 3811 Coventry CN  
CITY-ST-ZIP Boca Raton, FL 33496

TITLE President ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE Director ☐ Change ☒ Addition  
NAME Sam Seidel  
STREET ADDRESS 3789 Coventry LN  
CITY-ST-ZIP Boca Raton, FL 33496

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: [Signature]

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-6-06