2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005583

FILED Apr 20, 2009 Secretary of State

Entity Name: COVENTRY AT WOODFIELD COUNTRY CLUB, INC.

Current Principal Place of Business:		New Principal Place of Business:	
LANG MGT CO 21045 COMMERCIAL TRAIL BOCA RATON, FL 33486		LANG MANAGEMENT CO 21045 COMMERCIAL TRAIL BOCA RATON, FL 33486	
Current Mailing Address:		New Mailing Address:	
LANG MGT CO 21045 COMMERCIAL TRAIL BOCA RATON, FL 33486		LANG MANAGEMENT CO 21045 COMMERCIAL TRAIL BOCA RATON, FL 33486	
Number: 65-0551792 FEI	Number Applied For () FEI Num	nber Not Applicable ()	Certificate of Status Desired (X)
ne and Address of Currer	nt Registered Agent:	Name and Address of N	lew Registered Agent:
		ISSACSON, WILLIAM K A 21045 COMMERCIAL TR BOCA RATON, FL 33486	AIL 6 US
ne State of Florida.	its this statement for the purpose of	r changing its registered o	mice of registered agent, of both,
SIGNATURE: ISAACSON, WILLIAM K.			04/20/2009
Electronic Sig	gnature of Registered Agent		Date
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
e: VP () Delete e: LISSAUER, JOANNE ess: 3798 COVENTRY LAN St-Zip: BOCA RATON, FL 33	NE	Title: () Name: Address: City-St-Zip:	Change () Addition
s S () Delete e: MEADE, MINDY ess: 3772 COVENTRY LN St-Zip: BOCA RATON, FL 33		Title: () Name: Address: City-St-Zip:	Change () Addition
T () Delete e: GOLDSTEIN, BEN ess: 3811 COVENTRY LN St-Zip: BOCA RATON, FL 33		Title: () Name: Address: City-St-Zip:	Change () Addition
e: P () Delete e: SILVERMAN, HOWAR ess: 3805 NW 65TH LANE St-Zip: BOCA RATON, FL 33	RD	Title: () Name: Address: City-St-Zip:	Change () Addition
D () Delete e: SANDEL, SAM ess: 3789 COVENTRY LN St-Zip: BOCA RATON, FL 33		Title: () Name: Address: City-St-Zip:	Change () Addition
St-Zip: BOCA RATON, FL 33 D () Delete e: SANDEL, SAM ess: 3789 COVENTRY LN	e	City-S Title: Name Addre	St-Zip: () :: :ss:

I hereby certify that the information supplied with this filing does not qualify 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: SILVERMAN, HOWARD P 04/20/2009