

2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Nov 22, 2005
Secretary of State

DOCUMENT# N95000005769

Entity Name: COVENTRY WAY AND COURT PROPERTY OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**957 LANTERN LIGHT COURT
TALLAHASSEE, FL 32312 US**New Principal Place of Business:**9688 DEER VALLEY DRIVE
TALLAHASSEE, FL 32312 US**Current Mailing Address:**957 LANTERN LIGHT COURT
TALLAHASSEE, FL 32312 US**New Mailing Address:**9688 DEER VALLEY DRIVE
TALLAHASSEE, FL 32312 US**FEI Number:** 59-3427930**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**CHARITY, DOUGLAS A
957 LANTERN LIGHT COURT
TALLAHASSEE, FL 32312 US**Name and Address of New Registered Agent:**CLAWSON, AUDREY M
9688 DEER VALLEY DRIVE
TALLAHASSEE, FL 32312 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: AUDREY M. CLAWSON

11/22/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** PD () Delete
Name: CHARITY, DOUGLAS A
Address: 957 LANTERN LIGHT COURT
City-St-Zip: TALLAHASSEE, FL 32312 US**Title:** VSD () Delete
Name: RICHTER, JAMES C
Address: 8092 LANTERN LIGHT COURT
City-St-Zip: TALLAHASSEE, FL 32312**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** PTD (X) Change () Addition
Name: CLAWSON, AUDREY M
Address: 9688 DEER VALLEY DRIVE
City-St-Zip: TALLAHASSEE, FL 32312 US**Title:** VD (X) Change () Addition
Name: FOLSOM, TOMMY
Address: 8031 LANTERNLIGHT ROAD
City-St-Zip: TALLAHASSEE, FL 32312 US

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: AUDREY M. CLAWSON

PTD

11/22/2005

Electronic Signature of Signing Officer or Director

Date