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Apr 22 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V56791 (9)

1. Corporation Name
COVENTRY BUILDERS, INC.

Principal Place of Business

1720 NW 42ND ST
OAKLAND PARK FL 33309
US

Mailing Address

1720 NW 42ND ST
OAKLAND PARK FL 33309-4459
US



3. Date Incorporated or Qualified 08/06/1992 3a. Date of Last Report 05/01/1996

2. Principal Place of Business

21 12610 Hwy 129 S
Suite, Apt. #, etc.

2a. Mailing Address

26 12610 Hwy 129 S
Suite, Apt. #, etc.

4. FEI Number
62-0351060

Applied For
Not Applicable

22 City & State

23 Live Oak FL

27 City & State

28 Live Oak FL

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

24 32060

25 Suwannee

29 32060

30 Suwannee

9. Name and Address of Current Registered Agent

FRAME, EDWARD
1720 NW 42ND ST
OAKLAND PARK FL 33309

10. Name and Address of New Registered Agent

81 Name Edward Frame
82 Street Address (P.O. Box Number is Not Acceptable)
12610 Hwy 129 S
83 Live Oak
84 City FL 85 Zip Code 32060

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *Edward Frame*
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4-15-97

12. OFFICERS AND DIRECTORS

TITLE P
NAME FRAME, EDWARD
STREET ADDRESS 1720 NW 42ND ST
CITY-ST-ZIP OAKLAND PARK FL ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P ☒ Change ☐ Addition
1.2 NAME Edward Frame
1.3 STREET ADDRESS 12610 Hwy 129 S
1.4 CITY-ST-ZIP Live Oak, FL 32060

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Edward Frame* Edward Frame 4-15-97 (904)362-2825
Signature and typed or printed name of signing officer or director Date Daytime Phone #

0208185

CR2E034 (9/96)