

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 16, 2003 8:00 am
Secretary of State

05-16-2003 90186 026 ****61.25

DOCUMENT # 721650

1. Entity Name

COQUINA COVE CONDOMINIUM APTS, INC.



Principal Place of Business

**261 BANYAN BOULEVARD
NAPLES FL 34103
US**

Mailing Address

**5860 18TH AVENUE N.W.
NAPLES FL 34119
US**

2. Principal Place of Business

3. Mailing Address

2335 9th Street N

Suite, Apt. #, etc.

Suite, Apt. #, etc.

#505

City & State

Naples FL

Zip

Country

34103

Collier

4. FEI Number **59-1445543**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**WHELOCK, KENNETH
5860 18TH AVENUE, N.W.
NAPLES FL 34119**

7. Name and Address of New Registered Agent

Name **Gulf View Property Management**

Street Address (P.O. Box Number is Not Acceptable)
2335 9th St. N #505

City **Naples**

FL

Zip Code
34103

8. I, the above named entity, submit 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 reinstating)

DATE

FILE NOW: FEE IS \$61.25

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	TD	<input type="checkbox"/> Delete
NAME	SCHENDEL, DALE	
STREET ADDRESS	1070 B 11TH ST S	
CITY-ST-ZIP	NAPLES FL	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	BEVINS, DON	
STREET ADDRESS	251 BANYAN BLVD, #101	
CITY-ST-ZIP	NAPLES FL 34103	
TITLE	VPD	<input checked="" type="checkbox"/> Delete
NAME	SMITH SHAREN D	
STREET ADDRESS	261 BANYAN BLVD #207	
CITY-ST-ZIP	NAPLES FL	
TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	BADEC, GORDON	
STREET ADDRESS	261 BANYAN BLVD., #206	
CITY-ST-ZIP	NAPLES FL 34103	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	JOHNSON, MIKE	
STREET ADDRESS	261 BANYAN BLVD #105	
CITY-ST-ZIP	NAPLES FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VPD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Gordon Bedall	
STREET ADDRESS	3901 Preserve Way	
CITY-ST-ZIP	Estero FL 33928	
TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Sharon Aronson	
STREET ADDRESS	261 Banyan Blvd.	
CITY-ST-ZIP	Naples FL 34102	
TITLE	PD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Nicholas Lasazen	
STREET ADDRESS	261 Banyan Blvd.	
CITY-ST-ZIP	Naples FL 34102	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Elizabeth Stevens	
STREET ADDRESS	261 Banyan Blvd.	
CITY-ST-ZIP	Naples FL 34102	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I 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 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 REQUIRED

Bedall 5-13-03

239-403-7991

CR2E037 (10/02)