2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 23, 2008 8:00 am
Secretary of State
05-23-2008 90020 026 ****61.25

DOCUMENT # 722659

1. Entity Name
THE COQUINA CLUB OF NAPLES, INC.

Principal Place of Business	Mailing Address
2335 TAMIAMI TR. NORTH STE 505 NAPLES, FL 34103	2335 TAMIAMI TR. NORTH STE 505 NAPLES, FL 34103

01052008 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-1458658 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
GULF VIEW PROPERTY MANAGEMENT, INC. 2335 TAMIAMI TR. NORTH STE 505 NAPLES, FL 34103	Name 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2008

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	PD TRUNCK, JAMES 3200 GULF SHORE BLVD. N., #301 NAPLES, FL 34103	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	DIRECTOR WILLIAM KIRCHOFF 3200 GULFSHORE BLVD. N #211 (211) NAPLES, FL 34103	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	VPD MORRIS, JEANNINE 3200 GULF SHORE BLVD N., #306 NAPLES, FL 34103	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	TSD GIACCI, JOSEPH 3200 GULF SHORE BLVD N #210 NAPLES, FL 34103	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	TREASURER & DIRECTOR SUSAN MACCARIO 3200 GULFSHORE BLVD. N. #305 NAPLES, FL 34103	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	SD ARBITRIO, BARBARA 3200 GULFSHORE BLVD N #414 NAPLES, FL 34103	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	D DISSELHORST, CHARLES 3200 GULFSHORE BLVD N #113 NAPLES, FL 34103	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	PRESIDENT & DIRECTOR CHARLES DISSELHORST 3200 GULFSHORE BLVD. N. #113 NAPLES FL 34103	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Charles H. Disselhorst CHARLES H. DISSELHORST 3/25/08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

239-430-4344