2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2004 8:00 am
Secretary of State
03-30-2004 90006 019 ****61.25

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DOCUMENT # N02000001937

1. Entity Name
COCONUT SHORES II CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
C/O R&P PROP. MGMT 265 AIRPORT RD S NAPLES, FL 34104	C/O R&P PROP. MGMT 265 AIRPORT RD S NAPLES, FL 34104

03082004 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
c/o P+M Property Mgmt	c/o P+M. Property Mgmt
Suite, Apt. #, etc. 15660 San Carlos Blvd #40	Suite, Apt. #, etc. 15660 San Carlos Blvd. #40
City & State Ft. Myers, FL.	City & State Ft. Myers, FL
Zip / Country 33908	Zip / Country 33908

4. FEI Number
11-3654560
☐ 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
R&P PROPERTY MANAGEMENT 265 AIRPORT RD S NAPLES, FL 34104	Name: Sapp, Paul L Street Address (P.O. Box Number is Not Acceptable): c/o P+M Property Management 15660 San Carlos Blvd. #40 City: Ft. Myers FL Zip Code: 33908

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: Paul L. Sapp III 3-8-04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2004

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	D HOOLIHAN, THOMAS 8001 VINTAGE PKY. FT. MYERS, FL 33912	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD Stephen Wankewicz c/o P+M Property Mgmt 15660 San Carlos Blvd. #40 Ft. Myers, FL 33908 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HEREK, MARGO 8001 VINTAGE PKY. FT. MYERS, FL 33912	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD Michelle Allen 15660 San Carlos Blvd. #40 Ft. Myers, FL 33908 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KOENIG, LORI 8001 VINTAGE PKY. FT. MYERS, FL 33912	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD Pottie Vanderford 15660 San Carlos Blvd. #40 Ft. Myers, FL. 33908 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ 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 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: Stephen W. Wankewicz 3/11/04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #