

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003212

FILED  
Apr 25, 2006  
Secretary of State

Entity Name: COCONUT BAY II AT BRIDGEWATER CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

2055 TRADE CENTER WAY  
NAPLES, FL 34109

**New Principal Place of Business:**

6700 LONE OAK BLVD  
NAPLES, FL 34109

**Current Mailing Address:**

C/O SOUTHWEST PROPERTY MGMTN  
1044 CASTELLO DRIVE, #206  
NAPLES, FL 34103 US

**New Mailing Address:**

6700 LONE OAK BLVD  
NAPLES, FL 34109

FEI Number: 51-0458480

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

COLEMAN, KEVIN G  
4001 TAMIAMI TRAIL NORTH  
SUITE 300  
NAPLES, FL 34103 US

**Name and Address of New Registered Agent:**

GUARDIAN PROPERTY MANAGEMENT  
6700 LONE OAK BLVD  
NAPLES, FL 34109 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: BYRON ROSS

04/25/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: COTTER, JEFFREY J  
Address: 90 MINNEHAHA CIRCLE  
City-St-Zip: MAITLAND, FL 32751

Title: D ( ) Delete  
Name: WOOD, GARY S  
Address: 25099 PINEWATER COVE  
City-St-Zip: BONITA SPRINGS, FL 34134

Title: D ( ) Delete  
Name: WENDT, PETER  
Address: 14588 JONATHAN HARBOR DRIVE  
City-St-Zip: FORT MYERS, FL 33908

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: MITSHELE, MICHAEL  
Address: 3053 DRIFTWOOD WAY #3902  
City-St-Zip: NAPLES, FL 34109

Title: VP (X) Change ( ) Addition  
Name: ROSE, PHILIP  
Address: 3049 DRIFTWOOD WAY #3801  
City-St-Zip: NAPLES, FL 34109

Title: S/T (X) Change ( ) Addition  
Name: RUGGLES, NADINE  
Address: 3053 DRIFTWOOD WAY #3905  
City-St-Zip: NAPLES, FL 34109

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: BYRON ROSS

MGR

04/25/2006

Electronic Signature of Signing Officer or Director

Date