2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 745253

Entity Name: COQUINA SANDS ASSOCIATION, INC.

Current Principal Place of Business:

305 5TH AVENUE SOUTH SUITE 206 NAPLES, FL 34102

Current Mailing Address:

305 5TH AVE. SOUTH SUITE 206 NAPLES, FL 34102 US

FEI Number: 02-6275483

Name and Address of Current Registered Agent:

DUSTIN, KERRY 305 5TH AVE. SOUTH SUITE 206 NAPLES, FL 34102 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	KERRY DUSTIN			
	Electronic Signature of Registered Agent			Date
Officer/Direc	tor Detail :			
Title	0	Title	D	
Name	CAMERON, MONICA	Name	HARALDSEN, MAJA	
Address	690 BANYAN CIRCLE	Address	1545 MUREX DR.	
City-State-Zip:	NAPLES FL 34102	City-State-Zip:	NAPLES FL 34102	
Title	0	Title	D	
Name	ZIMMERMAN, MIKE	Name	MAYBERRY-HATT, DIANNE	
Address	780 PINE COURT	Address	470 BANYAN BLVD.	
City-State-Zip:	NAPLES FL 34102	City-State-Zip:	NAPLES FL 34102	
Title	D	Title	VP	
Name	HURST, NANCY	Name	MAYER, JIM	
Address	1531 IXORA DRIVE	Address	1690 IXORA DRIVE	
City-State-Zip:	NAPLES FL 34102	City-State-Zip:	NAPLES FL 34102	
Title	0	Title	PRESIDENT	
Name	GARRITY, ARLENE	Name	DUSTIN, KERRY	
Address	305 5TH AVENUE SOUTH SUITE 206	Address	305 5TH AVENUE SOUTH SUITE 206	
City-State-Zip:	NAPLES FL 34102	City-State-Zip:	NAPLES FL 34102	

Continues on page 2

I hereby 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 all other like empowered.

SIGNATURE: KERRY DUSTIN	PRESIDENT	02/23/2015
Electronic Signature of Signing Officer/Director Detail		Date

FILED Feb 23, 2015 Secretary of State CC0548381103

Certificate of Status Desired: No

Electronic Signature of Signing Officer/Director Detail

Officer/Director Detail Continued :

Title	0	Title	0
Name	PINE, BOB	Name	SUCKOW, JAN
Address	305 5TH AVENUE SOUTH SUITE 206	Address	305 5TH AVENUE SOUTH SUITE 206
City-State-Zip:	NAPLES FL 34102	City-State-Zip:	NAPLES FL 34102
Title	0	Title	0
Name	MOLLOY, JOHN	Name	PETERSON, MARY PAT
Address	305 5TH AVENUE SOUTH SUITE 206	Address	305 5TH AVENUE SOUTH SUITE 206
City-State-Zip:	NAPLES FL 34102	City-State-Zip:	NAPLES FL 34102
Title	0	Title	DIRECTOR
Name	KEITH, JIM	Name	BARONE , BJ
Address	305 5TH AVENUE SOUTH SUITE 206	Address	1510 MANDARIN ROAD
City-State-Zip:	NAPLES FL 34102	City-State-Zip:	NAPLES FL 34102
Title	DIRECTOR	Title	DIRECTOR
Name	CALCE, JOHN	Name	STORTER, REX
Address	1505 IXORA DRIVE	Address	1500 NAUTILUS ROAD
City-State-Zip:	NAPLES FL 34102	City-State-Zip:	NAPLES FL 34102
		Title	DIRECTOR
Title	DIRECTOR	Name	MOELLERS, TERRI
Name	BENZING , PAUL	Address	1460 NAUTILUS ROAD
Address	1491 MANDARIN ROAD	City-State-Zip:	NAPLES FL 34102
City-State-Zip:	NAPLES FL 34102		