## 2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 745253** 

Entity Name: COQUINA SANDS ASSOCIATION, INC.

**Current Principal Place of Business:** 

1650 CRAYTON RD. NAPLES, FL 34102

**Current Mailing Address:** 

1650 CRAYTON RD. NAPLES, FL 34102 US

FEI Number: 02-6275483 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

LUTZ, WILLIAM J. 1650 CRAYTON RD. 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: WILLIAM J. LUTZ 02/14/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title **TREASURER** Title DIRECTOR BARRETT, GENE HURST, NANCY Name Name 1531 IXORA DRIVE Address 1650 CRAYTON RD. Address City-State-Zip: NAPLES FL 34102 NAPLES FL 34102 City-State-Zip:

Title DIRECTOR Title DIRECTOR Name STORTER, REX Name CALCE, JOHN Address 1500 NAUTILUS ROAD Address 1505 IXORA DRIVE

NAPLES FL 34102 City-State-Zip: NAPLES FL 34102 City-State-Zip:

Title DIRECTOR VΡ

Title Name DUSTIN, KERRY KIPP, TAMMY Name Address 1625 IXORA DR. Address 650 BANYAN CIRCLE City-State-Zip: NAPLES FL 34102 City-State-Zip: NAPLES FL 34102

Title DIRECTOR Title DIRECTOR

Name BAREFOOT, LINCOLN LUTZ, WILLIAM J. Name 1450 MANDARIN RD. Address 1779 CRAYTON RD. Address City-State-Zip: NAPLES FL 34102 City-State-Zip: NAPLES FL 34102

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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.

02/14/2021 SIGNATURE: EUGENE BARRETT TREASURER

Electronic Signature of Signing Officer/Director Detail

Date

**FILED** Feb 14, 2021

**Secretary of State** 

0913467201CC

## Officer/Director Detail Continued:

Title PRESIDENT

Name ASSAAD, MIKE

Address 1400 GULF SHORE BLVD. N

SUITE 106

City-State-Zip: NAPLES FL 34102

Title DIRECTOR Name CASE, KIM

Address 1491 MUREX DRIVE

City-State-Zip: NAPLES FL 34102

Title DIRECTOR

Name ROZMAN, MARTHA

Address 1200 GULF SHORE BLVD N

APT 201

City-State-Zip: NAPLES FL 34102