## 2023 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

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

DAVID , BROWN A B 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	: DAVID A B BROWN			04/12/2023			
	Electronic Signature of Registered Agent			Date			
Officer/Director Detail :							
Title	DIRECTOR	Title	SECRETARY				
Name	BARRETT, GENE	Name	STEFFANCI, ROMA				
Address	1650 CRAYTON RD.	Address	1275 GULF SHORE BLVD N UNIT 202 NAPLES FL 34102				
City-State-Zip:	NAPLES FL 34102	City-State-Zip:					
Title Name Address City-State-Zip: Title Name Address City-State-Zip:	PRESIDENT EVANS, MAEGAN 1625 IXORA ROAD NAPLES FL 34102 DIRECTOR DUSTIN, KERRY 1625 IXORA DR. NAPLES FL 34102	Title Name Address City-State-Zip: Title Name Address City-State-Zip:	DIRECTOR LUTZ, WILLIAM J. 1779 CRAYTON RD.				
Title Name Address City-State-Zip:	PRESIDENT ASSAAD, MIKE 1400 GULF SHORE BLVD. N SUITE 106 NAPLES FL 34102	Title Name Address City-State-Zip:	DIRECTOR ROZMAN, MARTHA 1200 GULF SHORE BLVD N APT 201				

## 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: DAVID A B. BROWN

TREASURER

04/12/2023

Electronic Signature of Signing Officer/Director Detail

Date

# FILED Apr 12, 2023 Secretary of State 7101612957CC

Certificate of Status Desired: No

### **Officer/Director Detail Continued :**

Title	DIRECTOR	Title	TREASURER
Name	CASE, KIM	Name	BROWN, DAVID A B
Address	1491 MUREX DRIVE	Address	1605 CRAYTON ROAD
City-State-Zip:	NAPLES FL 34102	City-State-Zip:	NAPLES FL 34102