

2022 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: No

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

02/04/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
Name BARRETT, GENE
Address 1650 CRAYTON RD.
City-State-Zip: NAPLES FL 34102

Title SECRETARY
Name STEFFANCI, ROMA
Address 1275 GULF SHORE BLVD N
 UNIT 202
City-State-Zip: NAPLES FL 34102

Title DIRECTOR
Name STORTER , REX
Address 1500 NAUTILUS ROAD
City-State-Zip: NAPLES FL 34102

Title VP
Name KIPP, TAMMY
Address 650 BANYAN CIRCLE
City-State-Zip: NAPLES FL 34102

Title DIRECTOR
Name DUSTIN, KERRY
Address 1625 IXORA DR.
City-State-Zip: NAPLES FL 34102

Title DIRECTOR
Name LUTZ, WILLIAM J.
Address 1779 CRAYTON RD.
City-State-Zip: NAPLES FL 34102

Title DIRECTOR
Name BAREFOOT, LINCOLN
Address 1450 MANDARIN RD.
City-State-Zip: NAPLES FL 34102

Title PRESIDENT
Name ASSAAD, MIKE
Address 1400 GULF SHORE BLVD. N
 SUITE 106
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.

SIGNATURE: GENE BARRETT

TREASURER

02/04/2022

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name ROZMAN, MARTHA
Address 1200 GULF SHORE BLVD N
APT 201
City-State-Zip: NAPLES FL 34102

Title DIRECTOR
Name CASE, KIM
Address 1491 MUREX DRIVE
City-State-Zip: NAPLES FL 34102