

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003615

Entity Name: ARIEL DUNES II CONDOMINIUM ASSOCIATION, INC.

FILED
Mar 10, 2016
Secretary of State
CC9778430313

Current Principal Place of Business:

215 GRAND BLVD
STE 200
MIRAMAR BEACH, FL 32550

Current Mailing Address:

215 GRAND BLVD
STE 200
MIRAMAR BEACH, FL 32550 US

FEI Number: 20-8312795

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DUNLAP & SHIPMAN, P. A.
60 CLAYTON LANE
SUITE A
SANTA ROSA BEACH, FL 32459 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 H. MILAM

03/10/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name CALDWELL, WALLY
Address 122 SEASCAPE BLVD.
 #1001
City-State-Zip: MIRAMAR BEACH FL 32550

Title VP
Name CURRAULT, JACK
Address 776 MARLENE DRIVE
City-State-Zip: GRENTA LA 70056

Title TREASURER
Name MILLIGAN, MICHAEL
Address 122 SEASCAPE BLVD.
 #401
City-State-Zip: MIRAMAR BEACH FL 32550

Title SECRETARY
Name KRUSE, JOHN
Address 122 SEASCAPE BLVD.
 #2402
City-State-Zip: MIRAMAR BEACH FL 32550

Title DIRECTOR
Name HANKINS, WILLIAM (BILL)
Address 122 SEASCAPE BLVD
 #904
City-State-Zip: MIRAMAR BEACH FL 32550

Title DIRECTOR
Name PASCOE, DAVID
Address 122 SEASCAPE BLVD.
 #804
City-State-Zip: MIRAMAR BEACH FL 32550

Title DIRECTOR
Name PIERCE, JOE
Address 122 SEASCAPE BLVD.
 #2201
City-State-Zip: MIRAMAR BEACH FL 32550

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: WALLY CALDWELL

PRESIDENT

03/10/2016

Electronic Signature of Signing Officer/Director Detail

Date