

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000003615

**Entity Name:** ARIEL DUNES II CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Jan 31, 2014**  
**Secretary of State**  
**CC7925291788**

**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:**

BECKER & POLIAKOFF, P.A.  
348 MIRACLE STRIP PKWY SW  
STE 7  
FORT WALTON BEACH, FL 32548 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title DV  
Name WITZEL, KURT  
Address 215 GRAND BLVD STE 200  
City-State-Zip: MIRAMAR BEACH FL 32550

Title DS  
Name ROLL, NANCY  
Address 215 GRAND BLVD STE 200  
City-State-Zip: MIRAMAR BEACH FL 32550

Title D  
Name BERNARD, BROOKS  
Address 215 GRAND BLVD STE 200  
City-State-Zip: MIRAMAR BEACH FL 32550

Title DP  
Name SCHAD, KEITH  
Address 215 GRAND BLVD STE 200  
City-State-Zip: MIRAMAR BEACH FL 32550

Title D  
Name HORN, DAWSON  
Address 215 GRAND BLVD STE 200  
City-State-Zip: MIRAMAR BEACH FL 32550

Title DT  
Name GREEN, WORTH  
Address 215 GRAND BLVD  
STE 200  
City-State-Zip: MIRAMAR BEACH FL 32550

Title D  
Name CALDWELL, WALLY  
Address 215 GRAND BLVD  
STE 200  
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: KEITH SCHAD**

**DP**

**01/31/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date