

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 722659

**FILED**  
**Mar 11, 2010**  
**Secretary of State**

**Entity Name:** THE COQUINA CLUB OF NAPLES, INC.

**Current Principal Place of Business:**

3200 GULF SHORE BLVD NORTH  
NAPLES, FL 34103

**New Principal Place of Business:**

**Current Mailing Address:**

2335 TAMIAMI TR. NORTH  
STE 505  
NAPLES, FL 34103

**New Mailing Address:**

**FEI Number:** 59-1458658

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GULF VIEW PROPERTY MANAGEMENT, INC.  
2335 TAMIAMI TR. NORTH  
STE 505  
NAPLES, FL 34103 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: KIRCHOFF, WILLIAM  
Address: 3200 GULF SHORE BLVD N #211  
City-St-Zip: NAPLES, FL 34103

Title: VPD  
Name: MORRIS, JEANNINE  
Address: 3200 GULF SHORE BLVD N., #306  
City-St-Zip: NAPLES, FL 34103

Title: TD  
Name: PAJAK, CAROL  
Address: 3200 GULF SHORE BLVD N #218  
City-St-Zip: NAPLES, FL 34103

Title: TD  
Name: WINNIE, CAROLE  
Address: 3200 GULF SHORE BLVD N #114  
City-St-Zip: NAPLES, FL 34103

Title: PD  
Name: DISSELHORST, CHARLES  
Address: 3200 GULF SHORE BLVD N #113  
City-St-Zip: NAPLES, FL 34103

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: CHARLES DISSELHORST

PD

03/11/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date