

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

DOCUMENT# 746385

**FILED**  
**Mar 25, 2010**  
**Secretary of State**

**Entity Name:** COASTAL I CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

4026 SE 12TH AVE  
CAPE CORAL, FL 33904 US

**New Principal Place of Business:**

**Current Mailing Address:**

1319 MIRAMAR ST  
STE 101  
CAPE CORAL, FL 33904 US

**New Mailing Address:**

**FEI Number:** 59-2274804      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

ZUNINO, PAOLA  
C/O GPM, INC.  
1319 MIRAMAR ST STE 101  
CAPE CORAL, FL 33904 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: V  
Name: BROSIG, EDITH K  
Address: 4026 SE 12TH AVE UNIT 206  
City-St-Zip: CAPE CORAL, FL 33904 US

Title: D  
Name: CASTONGUAY, JOSEPH  
Address: 700 SHORE DR #1101  
City-St-Zip: FALL RIVER, MA 02721 US

Title: ST  
Name: HYNES, LUCY J  
Address: 4026 SE 12TH AVE UNIT 102  
City-St-Zip: CAPE CORAL, FL 33904 US

Title: D  
Name: GNATZIG, MARTIN  
Address: N9360 5TH DR  
City-St-Zip: WESTFIELD, WI 53964

Title: PD  
Name: WILLIAMS, HILDA  
Address: 4034 SE 12TH AVENUE, UNIT 103  
City-St-Zip: CAPE CORAL, FL 33904 US

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: HILDA WILLIAMS

PD

03/25/2010

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

\_\_\_\_\_  
Date