

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000008281

FILED
Apr 15, 2010
Secretary of State

Entity Name: MARAVILLA IN OLDE NAPLES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

% COASTAL PROPERTY MGMT OF SW FL,INC
501 GOODLETTE RD. N., STE C-200
NAPLES, FL 34102 US

New Principal Place of Business:

COASTAL PROPERTY MGMT OF SW FL,INC
501 GOODLETTE RD. N., STE C-200
NAPLES, FL 34102 US

Current Mailing Address:

% COASTAL PROPERTY MGMT OF SW FL,INC
501 GOODLETTE RD. N., STE C-200
NAPLES, FL 34102 US

New Mailing Address:

COASTAL PROPERTY MGMT OF SW FL,INC
501 GOODLETTE RD. N., STE C-200
NAPLES, FL 34102 US

FEI Number: 59-3732153

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COASTAL PROPERTY MANAGEMENT OF SW FL, INC.
501 GOODLETTE RD. N
SUITE C-200
NAPLES, FL 34102 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: P
Name: RAIMONDO, THOMAS
Address: 32 WILBUR STREET
City-St-Zip: WALTHAM, MA 02453 US

Title: VP
Name: DUNN, LINDA
Address: 980 EIGHTH AVE SOUTH
City-St-Zip: NAPLES, FL 34102 US

Title: S/T
Name: JACKSON, MARK
Address: 838 TENTH ST S
City-St-Zip: NAPLES, FL 34102 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: JOHN S GREEN

MGR

04/15/2010

Electronic Signature of Signing Officer or Director

Date