

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000000518

FILED  
Apr 12, 2010  
Secretary of State

**Entity Name:** THE DUNES OF NAPLES II CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

315 DUNES BLVD  
NAPLES, FL 34110 US

**New Principal Place of Business:**

**Current Mailing Address:**

3050 N HORSESHOE DR #275  
NAPLES, FL 34104 US

**New Mailing Address:**

**FEI Number:** 59-3696083

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

VANDALL, BONITA D  
3050 N HORSESHOE DR #275  
NAPLES, FL 34104 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: DP  
Name: COIN, TASSO  
Address: 315 DUNES BLVD., #707  
City-St-Zip: NAPLES, FL 34110

Title: DVP  
Name: POLLACK, JORDAN  
Address: 315 DUNES BLVD., #303  
City-St-Zip: NAPLES, FL 34110

Title: DS  
Name: STARR, WAYNE  
Address: 315 DUNES BLVD #705  
City-St-Zip: NAPLES, FL 34110

Title: DT  
Name: WOOD, PAUL  
Address: 315 DUNES BLVD., #805  
City-St-Zip: NAPLES, FL 34110

Title: D  
Name: FRISCH, FRED  
Address: 315 DUNES BLVD. #706  
City-St-Zip: NAPLES, FL 34110

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: TASSO COIN

P

04/12/2010

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

\_\_\_\_\_  
Date