## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02000003211

FILED Apr 25, 2006 Secretary of State

Entity Name: COCONUT BAY I AT BRIDGEWATER BAY CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

2055 TRADE CENTER WAY 6700 LONE OAK BLVD NAPLES, FL 34109 NAPLES, FL 34109

Current Mailing Address: New Mailing Address:

C/O SOUTHWEST PROPERTY MGMT. 6700 LONE OAK BLVD 1044 CASTELLO DRIVE #206 NAPLES, FL 34109

NAPLES, FL 34103

FEI Number: 51-0458477 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

COLEMAN, KEVIN G

4001 TAMIAMI TRAIL NORTH

SUITE 300

NAPLES, FL 34103 US

GUARDIAN PROPERTY MANAGEMENT
6700 LONE OAK BLVD
NAPLES, FL 34109 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: BYRON ROSS 04/25/2006

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: P (X) Change ( ) Addition Name: MARSHALL, BRAD Name: SLAMA, RICHARD

Name: Name: SLAWA, RICHARD

Address: 3054 DRIFTWOOD #4504 Address: 3062 DRIFTWOOD WAY #4306

City-St-Zip: NAPLES, FL 34109 City-St-Zip: NAPLES, FL 34109

Title: T ( ) Delete Title: VP (X) Change ( ) Addition

 Name:
 O'NEIL, DAN
 Name:
 CONNELL, DIANE

 Address:
 3054 DRIFTWOOD #4501
 Address:
 3058 DRIFTWOOD WAY #4407

City-St-Zip: NAPLES, FL 34109 City-St-Zip: NAPLES, FL 34109

Title: D ( ) Delete Title: S/T (X) Change ( ) Addition Name: CONNELL, DIANE Name: LACHANCE, DAN

Address: 3054 DRIFTWOOD #4407 Address: 3057 DRIFTWOOD WY #4003

City-St-Zip: NAPLES, FL 34109 City-St-Zip: NAPLES, FL 34109

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: BYRON ROSS MGR 04/25/2006