## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N97000006651

FILED Apr 11, 2009 Secretary of State

Entity Name: COCONUT ISLE NEIGHBORHOOD ASSOCIATION, INC.

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

%GULF BREEZE MGMT. SVCS. OF SW FL, LLC 8910 TERRENE CT., SUITE 200 BONITA SPRINGS, FL 34145 US

Current Mailing Address: New Mailing Address:

%GULF BREEZE MGMT. SVCS. OF SW FL, LLC 8910 TERRENE CT., SUITE 200 BONITA SPRINGS, FL 34145 US

FEI Number: 59-3488823 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:

WEIDER, RALPH L %GULF BREEZE MGMT. SVCS, OF SW FL, LLC 8910 TERRENE COURT, SUITE 200 BONITA SPRINGS, FL 34135 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:

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 VD ( ) Delete
 Title:
 PD (X) Change ( ) Addition

 Name:
 JENSEN, WAYLAND
 Name:
 JENSEN, WAYLAND

 Address:
 26418 BRICK LN
 Address:
 26418 BRICK LANE

City-St-Zip: BONITA SPRINGS, FL 34134 City-St-Zip: BONITA SPRINGS, FL 34134

Title: PD ( ) Delete Title: VD (X) Change ( ) Addition

 Name:
 MAYBROOK, SHARON
 Name:
 PORTER, J. ROGER

 Address:
 26448 BRICK LANE
 Address:
 26412 BRICK LANE

 City-St-Zip:
 BONITA SPRINGS, FL 34134
 City-St-Zip:
 BONITA SPRINGS, FL 34134

Title: TSD ( ) Delete Title: STD (X) Change ( ) Addition

 Name:
 PORTER, ROGER
 Name:
 KOTULA, DONALD

 Address:
 26412 BRICK LN
 Address:
 26436 BRICK LANE

City-St-Zip: BONITA SPRINGS, FL 34134 City-St-Zip: BONITA SPRINGS, FL 34134

I hereby certify that the information supplied with this filing does not qualify 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: WAYLAND JENSEN PRES 04/11/2009