

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006651

FILED  
May 03, 2010  
Secretary of State

**Entity Name:** COCONUT ISLE NEIGHBORHOOD ASSOCIATION, INC.

**Current Principal Place of Business:**

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

**New Principal Place of Business:**

**Current Mailing Address:**

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

**New Mailing Address:**

**FEI Number:** 59-3488823      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**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:**

Title: PD  
Name: JENSEN, WAYLAND  
Address: 26418 BRICK LANE  
City-St-Zip: BONITA SPRINGS, FL 34134

Title: VD  
Name: PORTER, J. ROGER  
Address: 26412 BRICK LANE  
City-St-Zip: BONITA SPRINGS, FL 34134

Title: STD  
Name: KOTULA, DONALD  
Address: 26436 BRICK LANE  
City-St-Zip: BONITA SPRINGS, FL 34134

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: WAYLAND JENSEN

PRES

05/03/2010

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

\_\_\_\_\_  
Date