

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 748986

**Entity Name:** COASTAL II CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Apr 17, 2023**  
**Secretary of State**  
**8032289791CC**

**Current Principal Place of Business:**

C/O GPM CONDOMINIUM ASSOCIATION  
1319 MIRAMAR ST 101  
CAPE CORAL, FL 33904

**Current Mailing Address:**

C/O GPM CONDOMINIUM ASSOCIATION  
1319 MIRAMAR ST 101  
CAPE CORAL, FL 33904 US

**FEI Number:** 59-2034469

**Certificate of Status Desired:** No

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

STACY, FAITH  
C/O GPM CONDOMINIUM ASSOCIATION  
1319 MIRAMAR ST 101  
CAPE CORAL, FL 33904 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:** FAITH STACY

04/17/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            CHENOT, GLENN  
Address        C/O GPM CONDOMINIUM  
                  ASSOCIATION  
                  1319 MIRAMAR ST 101  
City-State-Zip: CAPE CORAL FL 33904

Title            DIRECTOR  
Name            ARDOLF, JOHN  
Address        C/O GPM CONDOMINIUM  
                  ASSOCIATION  
                  1319 MIRAMAR ST 101  
City-State-Zip: CAPE CORAL FL 33904

Title            SECRETARY  
Name            WOHLEBEN, MICHAEL  
Address        C/O GPM CONDOMINIUM  
                  ASSOCIATION  
                  1319 MIRAMAR ST 101  
City-State-Zip: CAPE CORAL FL 33904

Title            TREASURER  
Name            COUTURE, DENNIS  
Address        C/O GPM CONDOMINIUM  
                  ASSOCIATION  
                  1319 MIRAMAR ST 101  
City-State-Zip: CAPE CORAL FL 33904

Title            VP  
Name            ESTES, CRAIG  
Address        C/O GPM CONDOMINIUM  
                  ASSOCIATION  
                  1319 MIRAMAR ST 101  
City-State-Zip: CAPE CORAL FL 33904

*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:** GLENN CHENOT

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04/17/2023

Electronic Signature of Signing Officer/Director Detail

Date