

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000000416

**Entity Name:** COCONUT PLACE COMMERCIAL CENTER CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Jan 16, 2020**  
**Secretary of State**  
**0277637434CC**

**Current Principal Place of Business:**

12330 TAMIAMI TRL E  
NAPLES, FL 34113

**Current Mailing Address:**

PO BOX 8537  
NAPLES, FL 34101 US

**FEI Number: 20-1012318**

**Certificate of Status Desired: No**

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

COMMERCIAL MANAGEMENT OF NAPLES, INC.  
9010 STRADA STELL CT #209  
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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title VP, T, S  
Name GRIFFITH, KATHY  
Address 12336 TAMIAMI TRAIL E.  
City-State-Zip: NAPLES FL 34113

Title PRESIDENT  
Name TRAUDT, MARY  
Address 12336 TAMIAMI TRAIL E  
C301  
City-State-Zip: NAPLES FL 34113

Title REGISTERED AGENT  
Name PREVOLOS, DEAN  
Address 9010 STRADA STELL CT  
209  
City-State-Zip: NAPLES FL 34109

*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: DEAN PREVOLOS**

**RA**

**01/16/2020**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date