

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 700988

FILED
May 02, 2002 8:00 AM
Secretary of State

Entity Name: THE HUMANE SOCIETY OF COLLIER COUNTY, INC.

Current Principal Place of Business:

370 AIRPORT RD N
NAPLES, FL 33942 US

New Principal Place of Business:

370 AIRPORT RD N
NAPLES, FL 34104 US

Current Mailing Address:

370 AIRPORT RD N
NAPLES, FL 33942 US

New Mailing Address:

370 AIRPORT RD N
NAPLES, FL 34104 US

FEI Number: 59-1033966

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALTHER, RONALD
10140 BOCA CIRCLE
NAPLES, FL 34109 US

Name and Address of New Registered Agent:

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: VP () Delete
Name: LEG, TOBIAS
Address: 606 SHORELINE DR.
City-St-Zip: NAPLES, FL 34119

Title: TD () Delete
Name: WALTHER, RONALD
Address: 10140 BOCA CIRCLE
City-St-Zip: NAPLES, FL 34109

Title: SD () Delete
Name: RICKLOFF, JACQUELINE M
Address: 3584 WINDJAMMER CIRCLE #1701
City-St-Zip: NAPLES, FL 34112

Title: PD (X) Delete
Name: MEHAS, SUSAN
Address: P.O. BOX 364 N/A
City-St-Zip: NAPLES, FL 341060364

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: LEE, TOBIAS
Address: 606 SHORELINE DR.
City-St-Zip: NAPLES, FL 34119

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PD (X) Change () Addition
Name: MEHAS, SUSAN
Address: P.O. BOX 364 N/A
City-St-Zip: NAPLES, FL 341060364

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: RONALD WALTHER

TD

05/02/2002

Electronic Signature of Signing Officer or Director

Date