

FILE NOW: FILING FEE IS \$61.25

FILED

Jan 20 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	---

DOCUMENT # **713439** (8)

1. Corporation Name

THE COLLIER FOUNDATION, INC.

Principal Place of Business

3001 NORTH TAMiami TRAIL
STE 207
NAPLES FL 33940
US

Mailing Address

3001 NORTH TAMiami TRAIL
STE 207
NAPLES FL 33940
US

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip **34103**

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip **34103**

Country

3. Date Incorporated or Qualified

10/10/1967

4. FEI Number

59-0163703

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

TEGMEYER, SUSETTE L.
2001 TAMiami TRAIL NORTH STE 207
NAPLES FL 34103

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **VD**
COLLIER, MILES C
STREET ADDRESS **3001 NORTH TAMiami TRAIL, STE 207**
CITY-ST-ZIP **NAPLES FL**

TITLE ☐ DELETE

NAME **PD**
READ, ISABEL COLLIER
STREET ADDRESS **3001 NORTH TAMiami TRAIL, STE 207**
CITY-ST-ZIP **NAPLES FL**

TITLE ☐ DELETE

NAME **DV**
COLLIER, BARRON G., II
STREET ADDRESS **3001 NORTH TAMiami TRAIL, STE 207**
CITY-ST-ZIP **NAPLES FL**

TITLE ☐ DELETE

NAME **ST**
TEGMEYER, SUSETTE L.
STREET ADDRESS **3001 NORTH TAMiami TRAIL NORTH, STE 207**
CITY-ST-ZIP **NAPLES FL**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☒ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

Treasurer
Susette L. Tegmeyer
3001 Tamiami Trail N., #207
Naples, FL 34103

Secretary
Joseph I. Perkovich
3001 Tamiami Trail N., #207
Naples, FL 34103

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:


SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/97)