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NONPROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
99 OCT 11 PM 12:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **716619**

Corporation Name
Y.M.C.A. OF COLLIER COUNTY, INC.

Principal Place of Business	Mailing Address
5450 YMCA ROAD NAPLES FL 33942 34109	5450 YMCA ROAD NAPLES FL 33942 34109

2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualified 05/27/1969
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 23-7039993 ☐ Applied For ☐ Not Applicable
City & State 23	City & State 28	5. Certificate of Status Desired ☑ $8.75 Additional Fee Required
Zip 24 34109 Country 25	Zip 29 34109 Country 30	6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

MILLER, KEVIN
YMCA OF COLLIER COUNTY, INC
5450 YMCA RD
NAPLES FL 33942 34109

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 34109

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P BLACK, J H 3200 BAILEY LN #115 NAPLES FL	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	D Black, J H P.O. Box 413021 Naples FL 34101-3021 ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HONEYCUTT, SUKIE 3050 HORESHOE DR NAPLES FL	☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	P Honeycutt, Sukie 1300 13th Street South Naples FL 34102 ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ANDERSON, KIM 5450 Y M C A RD NAPLES FL	☒ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	D Colleen Kvetko P.O. Box 413021 Naples FL 34101-3021 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S HUMPHREVILLE, JOHN 4501 TAMIAMI TR N NAPLES FL	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	400003018714--5 -10/19/99--01073--010 *****70.00 *****70.00 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T CORNELL, ANN 2640 GOLDEN GATE PKWY NAPLES FL	☒ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	T Ed Oates 2935 Bellflower Lane Naples FL 34105 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SMARGE, J 3861 DOMESTIC AVE NAPLES FL 34104	☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	☐ Change ☐ Addition SP

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, with all other like empowered.

SIGNATURE: _____ 4/27/99 941-262-5500
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL AUTHORIZED BY CORPORATION TO SIGN Date Daytime Phone Number

The YMCA of Collier County

October 7, 1999

Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a copy of our Nonprofit Corporation Annual Report previously filed April 28, 1999 but not received by your office. Please accept our replacement check enclosed and reinstate our corporation.

Thank You,

Donna Fernandez
Business Manager

5450 YMCA Road, Naples, Florida 34109 • (941) 597-3148 • Fax (941) 597-8415 • YMCANaples@prodigy.net

We build strong kids, strong families, strong communities.