

**NONPROFIT CORPORATION ANNUAL REPORT 1999**

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



99 APR -0 11 8:02

1 PROHIBIT GENERAL INVESTMENT TRUST INVESTMENT TRUST FUND  
 2 281016-90065-36 6

**DOCUMENT # 737756**

1. Corporation Name  
**ST. VINCENT DE PAUL SOCIETY NAPLES DISTRICT COUNCIL, INC.**

Principal Place of Business: 3120 DAVIS BLVD. NAPLES FL 33942-4363  
 Mailing Address: 2874 DAVIS BLVD. NAPLES FL 34104 US

21. Principal Place of Business	22. Mailing Address	23. Date Incorporated or Qualified
24. Subj. Apt. #, etc.	25. Subj. Apt. #, etc.	26. FEI Number
27. City & State	28. City & State	27. Applied For
29. Zip	30. Country	28. Not Applicable
31. 34104	32. US	29. Certificate of Status Desired
		30. \$8.75 Additional Fee Required
		31. Election Campaign Financing Trust Fund Contribution
		32. \$5.00 may be Added to Fee

8. Name and Address of Current Registered Agent	9. Name and Address of New Registered Agent
MERRELL, MARION J. 425 15TH ST. N.W. NAPLES FL 33984	81. Name 82. Street Address (P.O. Box Number is Not Acceptable) 83. 84. City 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: Marion J. Merrell DATE: 01/05/99

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD LOVING, NANCY	1.1 TITLE	President - <del>PT</del> Change
NAME	29 HIGH PT. CIR. E, #208	1.2 NAME	Larry Mills
STREET ADDRESS	NAPLES FL	1.3 STREET ADDRESS	4246 Lakewood Blvd.
CITY-ST-ZIP		1.4 CITY-ST-ZIP	Naples, FL 34113
TITLE	SD MARY MEAD	2.1 TITLE	Vice-Pres. Change
NAME	606 BROAD AVE. SO.	2.2 NAME	Marie Markunas
STREET ADDRESS	NAPLES FL	2.3 STREET ADDRESS	1424 Monarch Circle
CITY-ST-ZIP		2.4 CITY-ST-ZIP	Naples, FL 34116
TITLE	VP MILLS, LARRY	3.1 TITLE	Treasurer Change
NAME	4246 LAKEWOOD BLVD.	3.2 NAME	A.R. KUMICICH
STREET ADDRESS	NAPLES FL	3.3 STREET ADDRESS	2852 Aintree Lane Naples Fl. 34112
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	0 MARION J. MERRELL	4.1 TITLE	Ex Dir. Merrell
NAME	425 15TH ST. N.W.	4.2 NAME	Marion J. Merrell
STREET ADDRESS	NAPLES FL	4.3 STREET ADDRESS	425 15th St NW
CITY-ST-ZIP		4.4 CITY-ST-ZIP	Naples FL
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Marion J. Merrell SIGNATURE REQUIRED DATE: 01/05/99 (941)775-1667

*MARION J. MERRELL*

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4/13/99 1992