2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 21, 2003 8:00 am
Secretary of State
01-21-2003 90539 011 ****61.25

DOCUMENT # N00000008479

1. Entity Name
MS HOME-COLLIER COUNTY, INC.

Principal Place of Business	Mailing Address
705 WILLOWHEAD DR. NAPLES FL 34103	705 WILLOWHEAD DR. NAPLES FL 34103

CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
1710 SWHealth PKWY	PO Box 110655
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Naples Florida	City & State: Naples Florida
Zip: 34108 Country: Collier	Zip: 34108 Country: Collier

4. FEI Number 31-1763776 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
LUTHERINGER, LISA 705 WILLOWHEAD DR. NAPLES FL 34103	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Lisa Luthringer President, LEA Luthringer 1/15/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LUTHERINGER, LISA 705 WILLOWHEAD DR. NAPLES FL 34103	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☒ Addition Louis Girardin 711 5th Avenue South #212 Naples, FL 34102
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HEIL, DEBBIE 6582 TRAIL BLVD. NAPLES FL 34108	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☒ Addition Natalie Schaub Director of Finance/AMSouthBank 2435 Brentwood Blvd Naples, Florida
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DUNLAP, MICHAEL 5722 SEA GRASS LANE NAPLES FL 34116	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☒ Addition Barbara Webb 5716 Golf Park Blvd. Naples, Fl 34109
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D FONTELLA, DANIEL 4127 WILLOWHEAD WAY NAPLES FL 34103	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D RESHA, ROBERT 515 ANCHOR RODE DR. NAPLES FL 34103	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Finance Natalie Schaub error Naples, Florida	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (10/02)

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Lisa Luthringer VP MSA President 1/15/03 2395931905
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #