## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01024

Apr 12, 2007 Secretary of State

Entity Name: LITERACY VOLUNTEERS OF COLLIER COUNTY, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

281 AIRPORT RD. S NAPLES, FL 34104 US

**Current Mailing Address: New Mailing Address:** 

281 AIRPORT RD. S NAPLES, FL 34104 US

FEI Number: 59-2358999 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BOND, SCHOENECK & KING 1167 THIRD ST., SOUTH, SUITE 107 NAPLES, FL 33940

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

## **OFFICERS AND DIRECTORS:**

() Delete (X) Change ( ) Addition HAZELBAKER, JANA HAZELBAKER, JANA Name: Name: 9051 GULF SHORE DR PH2 Address: 281 AIRPORT RD SOUTH Address: City-St-Zip: NAPLES, FL 34108 City-St-Zip: NAPLES, FL 34104

Title: VD Title: VD ( ) Delete (X) Change ( ) Addition

CARDINELL, NANCY Name: ROETS, TOM Name: Address: Address:

18042 ROYAL HAMMOCK BLVD 281 AIRPORT RD SOUTH City-St-Zip: NAPLES, FL 34114 City-St-Zip: NAPLES, FL 34104

Title: () Delete Title: SD (X) Change ( ) Addition

PETERSON, JUDITH SUAREZ, SUSAN Name: Name: 504 TURTLE HATCH LN 281 AIRPORT RD SOUTH Address: Address: City-St-Zip: NAPLES, FL 34103 City-St-Zip: NAPLES, FL 34104

Title: ( ) Delete Title: PD (X) Change ( ) Addition TYLER, DAN Name: TYLER, DANNY Name:

2758 MEDALIST LANE 281 AIRPORT RD SOUTH Address: Address: City-St-Zip: NAPLES, FL 34109 City-St-Zip: NAPLES, FL 34104

Title: ( ) Delete Title: (X) Change ( ) Addition

COTMAN-THOMAS, DENISE MAYRIDES, ELAINE Name: Name: 2140 ABERDEEN LANE #202 281 AIRPORT RD SOUTH Address: Address: NAPLES, FL 34109 City-St-Zip: City-St-Zip: NAPLES, FL 34104

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: JANA HAZELBAKER TD 04/12/2007