2004 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

Apr 26, 2004 8:00 am Secretary of State DOCUMENT # N13429 1. Entity Name 04-26-2004 90466 013 ****61.25 LEAGUE OF WOMEN VOTERS OF COLLIER COUNTY EDUCATION FUND, INC. Principal Place of Business Mailing Address 0.1017700 660 9TH ST. NORTH 660 9TH ST. NORTH SUITE 35B SUITE 35B NAPLES FL 34102 NAPLES FL 34102 2. Principal Place of Business 3. Mailing Address POBOX 4883 P 0 130 X 9883 Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E037 (11/03) City & State City & State 4. FEI Number Applied For 59-2659558 NAPLES NAPLES, Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired U. S 13-U-5 12 34101 Fee Required 34101 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent CLARK, PATRICIA D Street Address (P.O. Box Number is Not Acceptable) 201 COLONADE CIRCLE NAPLES FL 34103 City 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 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 Make Check Payable to \$5.00 May Be Trust Fund Contribution. Due By May 1, 2004 Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE Delete DIRECTOR TITLE Addition NORTON, CONNIE BROWN, SANORA NAME NAME 5300 TAMARIND RIDGE DR STREET ADDRESS STREET ADDRESS 975 FOUNTAUN RUN NAPLES FL 34119 CITY-ST-ZIP CITY-ST-ZIP NAPLES, FL 34119 TITLE ☐ Delete SECRETARY TITLE ☐ Change Addition JODER, MARJORIE NAME WOLFE , HON CY P.O. BOX 770-789 STREET ADDRESS STREET ADDRESS 12902 BALD CYPRESSLANE NAPLES FL 34107 CITY-ST-782 CITY-ST-7IP NAPLES FL 34119 DD: F ☐ Delete TITLE 🗷 Change ☐ Addition DIRECTOR PIERCE, 'ALDA NAME NAME 517 REDATTA ROAD STREET ADDRESS STREET ADDRESS NAPLES FL 34103 CITY-ST-ZIF CITY-ST-ZIP 🔀 Delete PRESIDENT ☐ Change **I**S€Addition MACMILLAN, CLAIRE CROWLEY, SHETLAH NAME NAME 14 SABLE CAY STREET ADDRESS STREET ADDRESS 2743 BUCKTHORN WAY NAPLES FL 34102 CITY-ST-ZIP CITY-ST-ZIP NATLES , EL 34105 2 NP VICE YRES TITLE Delete TITLE Change Addition STOREY, DOLORES SLEBIDNIK, KATHLEEN NAME NAME 15197 MAJORA BAY DRIVE 32 PERBLE BEACH BLUD STREET ADDRESS STREET ADDRESS NAPLES FL 34110 NOPLES FL CITY-ST-ZIP CITY-ST-ZIP 34113 TITLE ☐ Delete TITLE ☐ Change IST ULCE PRES Addition

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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.

NAME

STREET ADDRESS

CITY-ST-ZIP

TUDO KATHERING

195 VINTAGE CIRCLE

NAPLES, FL 34119

11 ayou John MARJURIE JODER

STREET ADDRESS

CITY-ST-ZIP