

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N13429

**FILED**  
**Apr 01, 2010**  
**Secretary of State**

**Entity Name:** LEAGUE OF WOMEN VOTERS OF COLLIER COUNTY EDUCATION FUND, INC.

**Current Principal Place of Business:**

409 ARBOR LAKE DRIVE  
NAPLES, FL 34110 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 9883  
NAPLES, FL 34101 US

**New Mailing Address:**

**FEI Number:** 59-2659558

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JODER, MARJORIE J  
409 ARBOR LAKE DR  
NAPLES, FL 34110 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: 1VP  
Name: STRATON, CHRIS  
Address: 4260 MONTALVO COURT  
City-St-Zip: NAPLES, FL 34109

Title: TT  
Name: JODER, MARJORIE  
Address: P.O. BOX 770789  
City-St-Zip: NAPLES, FL 34107

Title: S  
Name: JOHNSON, JINNY  
Address: 7575 PELICAN BAY BLVD #902  
City-St-Zip: NAPLES, FL 34108

Title: 2VP  
Name: MCCANN, TOM  
Address: 709 PITCH APPLE LANE  
City-St-Zip: NAPLES, FL 34108

Title: P  
Name: GALTON, LYDIA  
Address: 442 ROSEMEADE LANE  
City-St-Zip: NAPLES, FL 34105

Title: D  
Name: SCHMELZ, BERNICE  
Address: 5575 DOGWOOD WAY  
City-St-Zip: NAPLES, FL 34116

I hereby 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 all other like empowered.

SIGNATURE: MARJORIE J JODER

TT

04/01/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date