2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14213

FILED Apr 28, 2010 Secretary of State

New Principal Place of Business:

Entity Name: FRIENDS OF COLLIER COUNTY MUSEUM, INC.

Current Principal Place of Business:

COLLIER COUNTY MUSEUM
3301 TAMIAMI TRAIL EAST
3301 TAMIAMI TRAIL EAST
3301 TAMIAMI TRAIL EAST

NAPLES, FL 339624961 NAPLES, FL 34104

Current Mailing Address: New Mailing Address:

P.O. BOX 2181

NAPLES, FL 34102 US

FEI Number: 59-2653840 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:

HALE, WILLIAM N

147 CARIBBEAN COURT

NAPLES, FL 34108 US

MASTANDREA, TERRY

291 LEAWOOD CIRCLE

NAPLES, FL 34104 US

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: TERRY MASTANDREA 04/28/2010

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title:

Name: KIMBALL, CHRIS
Address: P.O. BOX 861
City-St-Zip: GOODLAND, FL 34140

Title: VPD

 Name:
 VALENTINE, SUZY

 Address:
 10971 RAGSDALE STREET

 City-St-Zip:
 BONITA SPRINGS, FL 34135

Title: VPD

 Name:
 LITT, LARRY

 Address:
 4864 LASQUETI WAY

 City-St-Zip:
 NAPLES, FL 34119

Title:

Name: CRAIG, DON

Address: 6423 BIRCHWOOD COURT City-St-Zip: NAPLES, FL 34109

Title:

Name: WATSON, MIMI Address: 43 EAST AVENUE City-St-Zip: NAPLES, FL 34108

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: TERRY MASTANDREA S 04/28/2010