


FILE NOW: FILING FEE IS \$61.25

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Jun 18 1998 8:00am
Secretary of State

NON-PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. McIlham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT #	N40631	(6)
1. Corporation Name		
YOUTH DEVELOPMENT FOUNDATION OF COLLIER COUNTY, INC.		

Principal Place of Business	Mailing Address
2706 S HORSHOE DR. NAPLES FL 33942	2706 S HORSHOE DR. NAPLES FL 33942

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

9. Name and Address of Current Registered Agent	
OLLIFF, GENE 3710 ESTEY AVE. NAPLES FL 33942	

10. Name and Address of New Registered Agent	
81 Name	F. Edward Johnson
82 Street Address (P.O. Box Number is Not Acceptable)	c/o Cheffy Passidomo Wilson & Johnson
83	821 Fifth Avenue South #201
84 City	Naples
85 Zip Code	FL 34102

11. Pursuant to the provisions of Sections 617.0503 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: *[Signature]* (F. Edward Johnson) DATE: *June 27, 1998*

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	Secretary
STREET ADDRESS	STREET ADDRESS	1.2 NAME	
CITY - ST - ZIP	CITY - ST - ZIP	1.3 STREET ADDRESS	
		1.4 CITY - ST - ZIP	
TITLE	NAME	2.1 TITLE	D Justin McLaughlin
STREET ADDRESS	STREET ADDRESS	2.2 NAME	850 Park Shore Dr
CITY - ST - ZIP	CITY - ST - ZIP	2.3 STREET ADDRESS	Naples FL 34103
		2.4 CITY - ST - ZIP	
TITLE	NAME	3.1 TITLE	D David Mobley
STREET ADDRESS	STREET ADDRESS	3.2 NAME	10621 Airport Rd N.
CITY - ST - ZIP	CITY - ST - ZIP	3.3 STREET ADDRESS	Naples, FL 34109
		3.4 CITY - ST - ZIP	
TITLE	NAME	4.1 TITLE	Treasurer
STREET ADDRESS	STREET ADDRESS	4.2 NAME	Colleen Baus
CITY - ST - ZIP	CITY - ST - ZIP	4.3 STREET ADDRESS	330 Pinehurst Cir.
		4.4 CITY - ST - ZIP	Naples, FL 34113
TITLE	NAME	5.1 TITLE	President
STREET ADDRESS	STREET ADDRESS	5.2 NAME	Angela Rose
CITY - ST - ZIP	CITY - ST - ZIP	5.3 STREET ADDRESS	3061 Sandpiper Bay Cir #J302
		5.4 CITY - ST - ZIP	Naples, FL 34112
TITLE	NAME	6.1 TITLE	D Clark Russell
STREET ADDRESS	STREET ADDRESS	6.2 NAME	3541 Mercantile Ave
CITY - ST - ZIP	CITY - ST - ZIP	6.3 STREET ADDRESS	Naples, FL 34104
		6.4 CITY - ST - ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Colleen Baus*



3. Date Incorporated or Qualified	11/01/1990
4. FEI Number	65-0232400
Applied For	Not Applicable

5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association?	<input type="checkbox"/> Yes <input type="checkbox"/> No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	<input type="checkbox"/> Yes <input type="checkbox"/> No

CR2E037 (10/97)

4-27-98 941-643-0578x320