## 2000 UNIFORM BUSINESS REPORT (UBR)

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SIGNATURE:

## FILED DOCUMENT # 760185 May 08, 2000 8:00 am Secretary of State 1. Entity Name BARRON COLLIER JR. FOUNDATION, INC. 05-08-2000 90205 019 \*\*\*\*61.25 Principal Place of Business Mailing Address P.O. BOX 413038 2600 GOLDEN GATE PARKWAY NAPLES FL 34101-3038 **STE-200** NAPLES FL 34105 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For City & State City & State 59-2140320 Not Applicable Zip Country Zip Country \$8.75 Additional Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) MARINELLI, PAUL J 2600 GOLDEN GATE PARKWAY STE-200-Zip Code City NAPLES FL 33942-0206 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. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW: 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. **Department of State** Added to Fees **FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. Delete TITLE Change ☐ Addition TITLE NAME COLLIER, MARGUERITE R NAME STREET ADDRESS STREET ADDRESS 2600 GOLDEN GATE PARKWAY CITY-ST-ZIP CITY-ST-ZIP NAPLES FL VD. Delete TITI F Change ☐ Addition TITLE PD NAME GABLE, LAMAR NAME STREET ADDRESS 2600 GOLDEN GATE PARKWAY STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Naples fl ☐ Delete TITLE Change ☐ Addition VŊ TITLE COLLIER, BARRON III NAME NAME STREET ADDRESS STREET ADDRESS 2600 GOLDEN GATE PARKWAY CITY+ST-7IP CITY-ST-ZIP naples fl Addition ☐ Change □ Defete TITLE TITLE Marinelli. Paul j NAME NAME STREET ADDRESS 2600 GOLDEN GATE PARKWAY STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NAPLES FL ☐ Delete TITLE Change ☐ Addition TITLE BOAZ, BRADLEY A. NAME NAME STREET ADDRESS STREET ADDRESS 2600 GOLDEN GATE PKWY, SUITE-200-CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34105 ☐ Delete Change Addition TITLE TITL F sproul, juliet c NAME NAME STREET ADDRESS STREET ADDRESS 2600 GOLDEN GATE PARKWAY CITY-ST-ZIP CITY-ST-ZIE NAPLES FL 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 eports 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 employeed to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if chapted or on an attachment with a made described by the property of the corporation of the receiver of trustee employeed.

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NTED NAME OF SIGNING OFFICER OR DIRECTOR

Daul J. Marinelli. Treasurer

(941)262-2600

Daytime Phone #

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	2000 OFFICERS AND DIRECTORS	:
OFFICER/ DIRECTOR	The second secon	
P/D	Lamar Gable 2600 Golden Gate Parkway Naples, FL 33942	·- ·
V/D	Barron Collier III 2600 Golden Gate Parkway Naples, FL 33942	
V/D	Juliet C. Sprout 2600 Golden Gate Parkway Naples, FL 33942	
T RA	Paul J. Marinelli 2600 Golden Gate Parkway Naples, FL 33942	
S	Bradley A. Boaz 2600 Golden Gate Parkway	

Naples, FL 33942