

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01024

Entity Name: LITERACY VOLUNTEERS OF COLLIER COUNTY, INC.**Current Principal Place of Business:**8833 TAMIAMI TRAIL EAST
NAPLES, FL 34113**Current Mailing Address:**8833 TAMIAMI TRAIL EAST
NAPLES, FL 34113 US**FEI Number:** 65-0181251**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LEE A. MEYERS, CPA
9045 STRADA STELL COURT
106
NAPLES, FL 34109 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name SALTARELLI, JANET
Address 8833 TAMIAMI TRAIL E.
City-State-Zip: NAPLES FL 34113

Title ED
Name MAYRIDES, ELAINE
Address 8833 TAMIAMI TRAIL EAST
City-State-Zip: NAPLES FL 34113

Title DIRECTOR
Name RASMUSSEN, SANDRA
Address 8833 TAMIAMI TRAIL EAST
City-State-Zip: NAPLES FL 34113

Title DIRECTOR
Name NICHOLS, WILLIAM
Address 8833 TAMIAMI TRAIL EAST
City-State-Zip: NAPLES FL 34113

Title SECRETARY
Name PETERSON, JUDY
Address 8833 TAMIAMI TRAIL EAST
City-State-Zip: NAPLES FL 34113

Title DIRECTOR
Name MELHEIM, MITCH
Address 8833 TAMIAMI TRAIL EAST
City-State-Zip: NAPLES FL 34113

Title DIRECTOR
Name MEARS, WILLIAM
Address 8833 TAMIAMI TRAIL EAST
City-State-Zip: NAPLES FL 34113

Title DIRECTOR
Name STAM, SUSAN
Address 8833 TAMIAMI TRAIL EAST
City-State-Zip: NAPLES FL 34113

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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: ELAINE MAYRIDES**EXECUTIVE DIRECTOR****04/22/2015**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name TATEL, BARRY
Address 8833 TAMIAMI TRAIL EAST
City-State-Zip: NAPLES FL 34113

Title DIRECTOR
Name BIRCH, KATHRYN
Address 8833 TAMIAMI TRAIL EAST
City-State-Zip: NAPLES FL 34113