

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000006229

Entity Name: GENEALOGICAL SOCIETY OF COLLIER COUNTY, INC.**Current Principal Place of Business:**C/O MOORINGS PRESBYTERIAN CHURCH
791 HARBOUR DRIVE
NAPLES, FL 34103**Current Mailing Address:**P.O. BOX 7933
NAPLES, FL 34101**FEI Number:** 26-0460332**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**JOHNSON, GARY W
2660 66TH ST SW
NAPLES, FL 34105 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:** GARY W JOHNSON

01/09/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	OVERMAN, MARIE C
Address	P O BOX 2154
City-State-Zip:	NAPLES FL 34106-2154

Title	DIRECTOR
Name	MAUER, ARLENE
Address	P.O. BOX 7933
City-State-Zip:	NAPLES FL 34101

Title	T
Name	JOHNSON, GARY W
Address	8448 RADCLIFFE TERRACE, #103
City-State-Zip:	NAPLES FL 34120

Title	V
Name	SIEBENALLER, JACQUELINE
Address	5946 BERMUDA LANE
City-State-Zip:	NAPLES FL 34119

Title	DIRECTOR
Name	HILES, DAVID A
Address	6096 SHALLOW WAY
City-State-Zip:	NAPLES FL 34109-0761

Title	V
Name	ROPER, WERNER
Address	7843 IONIO CT.
City-State-Zip:	NAPLES FL 34114

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: JOHNSON, GARY W

TRESURER

01/09/2014

Electronic Signature of Signing Officer/Director Detail

Date