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.			
	SECRETARY	01/27/2014	

SECRETARY

#### SIGNATURE: GREGORY B BAKER

Electronic Signature of Signing Officer/Director Detail

#### DOCUMENT# N1100000955

Entity Name: COLLIER PROFESSIONAL FIREFIGHTERS & PARAMEDICS, IAFF LOCAL 2396, INC.

## **Current Principal Place of Business:**

4001 SANTA BARBARA BLVD #317 NAPLES, FL 34104

# **Current Mailing Address:**

4001 SANTA BARBARA BLVD #317 NAPLES, FL 34104

## FEI Number: 90-0648247

## Name and Address of Current Registered Agent:

BRANTLEY, JAMES 2050 MCGREGOR BLVD FORT MYERS, FL 33901 US

FILED Jan 27, 2014 Secretary of State CC3580770644

Certificate of Status Desired: Yes

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

## **Officer/Director Detail :**

Sincer/Director Detail.				
Title	PRES	Title	VP	
Name	TOBIN, CHRISTIAN	Name	WEINBAUM, CRAIG	
Address	5633 COVE CIRCLE	Address	17577 BRENTWOOD CT	
City-State-Zip:	NAPLES FL 34119	City-State-Zip:	FORT MYERS FL 33967	
Title	VP	Title	S	
Name	MADING, TRENTON	Name	BAKER, GREG	
Address	510 4TH ST SE	Address	7054 AMBROSIA LANE #3302	
City-State-Zip:	NAPLES FL 34117	City-State-Zip:	NAPLES FL 34119	
Title	Т			
Name	TRENT, MATTHEW			
Address	13530 LITTLE GEM CIRCLE			
City-State-Zip:	FORT MYERS FL 33913			

Date

Date