

700988

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900403906449

No. *AP# 988-A*

NAME

*Humane Society
of Naples, Inc.*

FILED IN THE OFFICE OF
SECRETARY OF STATE
OF FLORIDA

6/20/60

R. A. GRAY
SECRETARY OF STATE

BY

P. L.

STATE OF FLORIDA
OFFICE
SECRETARY OF STATE

RECEIVED
JUN 20 9 12 AM '60
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION NOT FOR PROFIT

Certificate Designating Place of Business or Domicile for the Service of Process Within This State, Naming Agent Upon Whom Process May Be Served and Names and Addresses of the Officers and Directors.

In pursuance of Chapter 47.34, Florida Statutes 1953, the following is submitted, in compliance with said Act:

First-That HUMANE SOCIETY OF NAPLES, INC.
a corporation duly organized and existing under the laws of the State of FLORIDA
with its principal place of business at City of NAPLES
County of COLLIER, State of FLORIDA
has designated and established 651 Fifth Avenue North
(Street or building)
City of Naples, County of Collier
State of Florida, as its place of business or domicile for the service of
process within this State, and named as its agents LOIS MARIE HOUSE
to accept service of process.

OFFICERS:	AFFIX TITLES: NAME	SPECIFIC ADDRESS
PRESIDENT	LOIS MARIE HOUSE	651 5th Avenue North, Naples, Fla.
VICE-PRESIDENT	MYRTLE LIEB	414 6th St. South, Naples, Fla.
SECRETARY	MERLE HARRIS	Naples Trailer Park, Naples, Fla.
TREASURER	SHIRLEY SHIPTON	Naples, Fla.

DIRECTORS:	NAME	SPECIFIC ADDRESS
	LOIS MARIE HOUSE	Naples, Florida
	MYRTLE LIEB	Naples, Florida
	COLONEL C. C. CARTER	Naples, Florida
	DOROTHY W. CARTER	Naples, Florida
	MARY W. MORRIS	Naples, Florida
	ERNEST H. NOYES	Naples, Florida

C. TAX
FILING
R. AGENT FEE
C. COPY
TOTAL
N. BANK
BALANCE DUE
REPORT

Having been named to accept service of process for the above stated corporation, at place designated in this certificate, I hereby accept to act in this capacity, and agree to comply with the provision of said Act relative to keeping open said office.

By Lois Marie House
Lois Marie House

It is necessary to file this certificate within thirty days after filing Certificate of Incorporation, as to domestic Corporations and within thirty days after issuance of permit to foreign corporations; and thereafter only when corporation has changed its place of business or agent.

Filing Fee, \$1.00

No. NP #988-B

1961

CORPORATION REPORT

*Herman Society
of Naples, Inc.*

P. O. ADDRESS

Filed in the office of the Secretary of State
of the State of Florida, this

day of

A. D. 19

Secretary of State

CORPORATION REPORT TO THE SECRETARY OF STATE OF FLORIDA

Railroad Companies, Pullman Companies, Telephone and Telegraph Companies, Insurance Companies, Banking and Trust Companies, Building and Loan Associations, Cooperative Marketing Associations, Corporations not for profit and Corporations paying the maximum capital stock tax, as required by Section 606.32, Florida Statutes, 1961.

Hon. R. A. Gray, Secretary of State
Tallahassee, Florida

In accordance with the law above referred to, we submit below information called for:

(1) That The Humane Society of Naples, Inc.
Name of Corporation
duly organized and existing under the laws of the State of Florida
with its principal place of business at Naples City Fla. State
Collier County, has designated 651 Fifth Avenue North
Street or Building
City of Naples County of Collier State of Florida.
as its place of business or domicile for the service of process within the State, and has named as its agent,
Lois Marie House
whose address is 651 Fifth Avenue North

(2) NAMES AND ADDRESSES OF OFFICERS (be sure to affix titles):

Name	P. O. Address
<u>Lois Marie House, Pres.</u>	<u>651 Fifth Ave. No.</u>
<u>Myrtle Lieb, Vice Pres.</u>	<u>414 6th Street So.</u>
<u>Morale Harris, Sec.</u>	<u>Pino Ridge</u>
<u>Tom Morgan, Jr., Treas.</u>	<u>626 West Lake Dr.</u>

(3) NAMES AND ADDRESSES OF DIRECTORS:

Name	P. O. Address
<u>Col. G.C. Carter</u>	<u>1976 Galloan Drive</u>
<u>Mrs. C.C. Carter</u>	<u>1976 Galloan Drive</u>
<u>Mrs. B.W. Morris</u>	<u>595 Third Street No.</u>

(4) GENERAL NATURE OF MAIN BUSINESS ENGAGED IN

Society for Prevention of Cruelty to Animals

(5) Date of last meeting of Board of Directors

May 5, 1960
Has the Corporation been actively engaged in business during the previous twelve months? Yes

If inactive, state how long its charter powers have been dormant

(6) We, the undersigned, certify the above state of facts to be true and correct as shown by our records.

ATTEST:

Lois Marie House
President or Vice-President
Morale Harris
Secretary

STATE OF FLORIDA

COUNTY OF Collier

Personally appeared before me Lois Marie House & Morale Harris
who deposes and says that he executed this certificate for and in behalf of said corporation, and that the statement therein contained is true and correct to the best of his knowledge and belief.

Sworn to and subscribed before me this 6th day of February, 1961

SEAL

Robert C. Fuller - Notary Public
Signature of Officer Taking Acknowledgment.

Notary Public, State of Florida at Large
My Commission Expires February 1, 1962
The 1961 Legislature made it necessary for all corporations, Railroad Companies, Pullman Companies, Telephone and Telegraph Companies, Insurance Companies, Banking and Trust Companies, Building and Loan Associations, Cooperative Marketing Associations, Corporations not for profit and Corporations paying the maximum capital stock tax to file with the Secretary of State on July first of each year, a form he shall prescribe, giving the above information, however, they are not required to pay a corporation capital stock tax.

933 E

1963

REPORT OF
CORPORATION NOT FOR PROFIT

Humane Society of
(name)
Naples, Inc

P. O. ADDRESS

Filed in the office of the Secretary of State
of the State of Florida, this

day of

A. D. 19

TOM ADAMS, Secretary of State

**CORPORATION NOT FOR PROFIT
REPORT TO THE SECRETARY OF STATE OF FLORIDA**

Provided, that railroad, railroad, telephone, telegraph, insurance, banking and trust companies, building and loan associations, cooperative associations, CORPORATIONS NOT FOR PROFIT and corporations paying the maximum capital stock tax, shall be required to furnish the information (listed below) required under (a) through (f) of subsection (1) hereof only. (2) All reports herein required shall be for the calendar year and shall be due to be filed on JULY 1 of EACH YEAR... Section 608.32, Florida Statutes, 1963.

Hon. Tom Adams, Secretary of State
Tallahassee, Florida

In accordance with the law above referred to, we submit below information called for:

(1) That HUMANE SOCIETY OF NAPLES, INC.

Name of Corporation

duly organized and existing under Chapter 617, Florida Statutes, 1959 as a corporation not for profit with its

home office at NAPLES FLORIDA
City State

COLLIER has designated NAPLES AIRPORT
County Street or Building

City of NAPLES, County of COLLIER, State of Florida,
as its place of business or domicile for the service of process within the State, and has named as its agent,

Smith, Carroll, Vega & Brown Attorneys

whose address is Balch Building, Naples, Florida

(2) NAMES AND ADDRESSES OF OFFICERS (be sure to affix titles):

Name

P. O. Address

Mrs. Walter Keller, President 1342 10th Street, North - Naples

Tom Morgan, Jr. - Vice President 626 West Lake Drive - Naples

Mrs. Walter Condon - Secretary 483 8th Avenue, South - Naples

Elliott C. Fisher - Treasurer 684 12th Street, North - Naples

(3) NAMES AND ADDRESSES OF DIRECTORS:

Name

P. O. Address

Mrs. O. O. Carter P. O. Box 996, Naples, Florida

Tim Cantel Pine Ridge, Naples, Florida

Mrs. Edward Cape Smith 585 16th Avenue, S., Naples, Florida

(4) GENERAL PURPOSE CORPORATION NOT FOR PROFIT ORGANIZED IS:

Society for the Prevention of Cruelty to Animals

(5) Date of last meeting of Board of Directors May 2, 1963

Has the Corporation been actively engaged in conducting its affairs during the previous twelve months? Yes

If inactive, state how long its charter powers have been dormant. -

(6) We, the undersigned, certify the above state of facts to be true and correct as shown by our records.

ATTEST:

STATE OF FLORIDA

COUNTY OF Collier

I personally appeared before me Mrs. Walter Keller - (as Walter Condon)
who signed and says that he executed this certificate for and in behalf of said corporation, and that the statements contained are true and correct to the best of his knowledge and belief.

Sworn to and subscribed before me this 1st day of July, 1963

SEAL

Signature of Officer Taking Acknowledgment

NP-988

NP 7

988

HUMANE SOCIETY OF NAPLES,
INC.

FILED IN OFFICE OF SECRETARY
OF STATE, STATE OF FLORIDA,
by PBM on May 20, 1960

R. A. GRAY
SECRETARY OF STATE

GEORGE VEGA, JR.

NAPLES, FLORIDA

DATE: May 18, 1960

Honorable R. A. Gray
Secretary of State
State Capitol
Tallahassee, Florida

SUBJECT: Humane Society, Inc.

Enclosed are Articles of Incorporation for Humane Society of
Naples, Inc., in duplicate.

Also enclosed is our check to you for \$11.00 covering:

1. Filing fee	\$8.00
2. Certified Copy	<u>3.00</u>

Total \$11.00

Respectfully,

SMITH, CARROLL & VEGA

Enc.

G. TAX	8.00
MIN:	
R. GEN. FEE	3.00
C. COPY	1.00
DEP.	1.00
PLAN. DUE	
REFUND	

any animals by humane education and enforcement of our laws.

ARTICLES OF INCORPORATION

OF

HUMANE SOCIETY OF NAPLES, INC.

RECEIVED
MAY 20 9 17 AM '60
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

KNOW ALL MEN BY THESE PRESENTS:

That we, the undersigned, have this day voluntarily associated ourselves together for the purpose of forming a corporation under the laws of the State of Florida, and to that end do hereby adopt Articles of Incorporation as follows:

I.

The name of this corporation shall be HUMANE SOCIETY OF NAPLES, INC. and it shall be located in Collier County, Florida.

II.

The principal object and purposes for which this corporation is to be formed shall be the protection of animals and provide for all stray and homeless animals, and the prevention of cruelty to any animals by humane education and enforcement of our laws.

III.

Membership in this organization shall be open to the public, the manner of admission to be set out in the By-laws.

IV.

This corporation shall exist perpetually.

V.

The names and residences of the subscribers to these Articles are as follows:

LOIS MARIE HOUSE	of 651 Fifth Avenue, N., Naples, Florida
Myrtle Lieb	of 414 Sixth Street, S., Naples, Florida
MERLE HARRIS	of Naples Trailer Park, Naples, Florida

VI.

The affairs of this corporation shall be conducted by a Board of Directors composed of not less than three (3) nor more than eleven (11) members who shall be selected by the membership, annually,

and by a President, Vice-President, Secretary, Treasurer and such other officers as may be designated by the Board of Directors who shall be elected annually by the Board of Trustees.

VII.

The names and titles of the officers and Board of Directors who are to manage the affairs of this corporation until their successors are duly appointed or elected, are as follows:

<u>Name</u>	<u>Office</u>	<u>Board of Directors</u>
Lois Marie House	President	Lois Marie House
Myrtle Lieb	Vice-President	Myrtle Lieb
Merle Harris	Secretary	Colonel C. C. Carter
Shirley Shipton	Treasurer	Dorothy W. Carter
		Mary W. Morris
		Ernest H. Noyes

VIII.

BY-LAWS - ARTICLES OF INCORPORATION: MAKING: ALTERNATION: REVISION

After approval of this Charter by the Court, the officers and directors of the Corporation shall be and constitute a committee to draw and submit, at a regular meeting, a set of by-laws for adoption and approval by the Corporation. A two-thirds majority of the members of the Corporation shall be required to confirm and ratify such by-laws. Any further amendment, recision or revision of by-laws of the Corporation or the Articles of Incorporation, shall be accomplished by a two-thirds vote of the Directors.

IX.

The highest amount of indebtedness or liability to which this Corporation may subject itself shall be Ten Thousand Dollars (\$10,000), and never to exceed an amount greater than 2/3 of the value of all property owned by the Corporation.

X.

The amount of real estate which this Corporation may hold shall not exceed Fifty Thousand Dollars (\$50,000) in value.

XI.

Upon dissolution of the Corporation, and prior to the completion thereof, all liabilities and obligations of the Corporation shall be paid, satisfied and discharged and all of the remaining assets, property and income owned or held by the Corporation, but not so owned or held upon a condition requiring return, transfer or conveyance by reason of the dissolution shall be expended for or applied to the purposes of the Corporation, or one or more of such purposes, exclusively, by transferring and conveying such assets, property and income to one or more corporations or organizations engaged in activities substantially similar to those of this Corporation (no part of the net earnings of which inures to the benefit of any private shareholder or individual, and no substantial part of the activities of which is carrying on propaganda, or otherwise attempting to influence legislation), in accordance with the laws governing not-for-profit corporations of the State of Florida, and no part of such remaining assets, property or income shall be distributed to members or to any other persons whatsoever.

AND YOUR SUBSCRIBERS WILL EVER PRAY, ETC.

Leis Marie House
Myrtle Lieb
Mervin L. Harris

STATE OF FLORIDA
 COUNTY OF COLLIER

PERSONALLY appeared before me, an officer duly authorized to administer oaths and take acknowledgments, the above-signed subscribers, to me well known and known to me to be the individuals described in, and they acknowledged and swore to me that they signed the foregoing instrument as subscribers and the application for a non-profit corporation charter, and that the said non-profit corporation charter application is made in good faith, and for the uses and purposes therein set forth.

WITNESS my hand and seal at Naples, Collier County, Florida,
 this the 18th day of May, 1960.

(NOTARY SEAL)

Alvarene Bryan
 Notary Public

My Commission Expires: Jan 8, 1961

NP 988-c

HUMANE SOCIETY OF AMERICA
INC.

AMEND ARTICLES II AND III

FILED IN OFFICE OF SECRETARY

OF STATE, STATE OF NEW YORK
BY

NOTARY PUBLIC

IN WITNESS WHEREOF

I have hereunto set my hand and seal

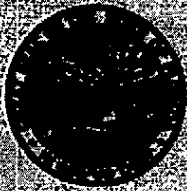
at the City of New York

this 1st day of January

1908

Notary Public

SECRETARY OF STATE



Office of the
Secretary of State
State of Florida
Tallahassee

TOM ADAMS
SECRETARY OF STATE

April 5, 1962

Messrs. Smith, Carroll, and Vega
Naples, Florida

Attention: Honorable Thomas R. Brown

Dear Mr. Brown:

This acknowledges receipt of the amendment to
the charter of HUMAN SOCIETY OF NAPLES, INC., a corporation
not for profit

and check for \$ 13.00. Said amendment has been
duly filed in this office on 5 April 1962.

Enclosed you will find certified copy.

Sincerely,

TOM ADAMS
Secretary of State

By
Corporation Division

TA/

Enclosures

THOMAS R. BROWN

DATE: MAR. 30, 1962

Corporate Div.
Secretary of State
Tallahassee, Florida

SUBJECT: Humane Society of
Naples, Inc.

✓
173-2-62-2 56400 *****3.00

FILE NO. - 2-62-2 56387 *****10.00

Gentlemen:

We enclose herewith Amendments to the Articles of Incorporation of the above corporation together with Affidavit. Our check for \$13.00 is also enclosed.

Please send us a conformed copy of these when they have been

Respectfully,

SMITH, CARROLL & VEGA

Thomas R. Brown

TRB:me
ENC.

[Handwritten signature]

C. TAX	
FILING	10.00
R. AGENT FEE	
C. COPY	2.13
TOTAL	12.13
N. BANK	13.00
BALANCE DUE	
REFUND	

RECEIVED
APR 5 12 54 PM '62
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

A F F I D A V I T

STATE OF FLORIDA

COUNTY OF COLLIER

BEFORE ME, an officer duly authorized to administer oaths and take acknowledgments, personally appeared
President of the HUMANE SOCIETY OF NAPLES, INC., who, first being duly sworn, deposes and sayeth:

1. That the document attached hereto consists of a true copy of the Amendment to the Articles of Incorporation of the HUMANE SOCIETY OF NAPLES, INC., which was passed at a meeting of the Board of Directors held on the 20th day of January, 1962, at 2:00 o'clock in the afternoon.

2. That said Amendment was passed in accordance with the Articles of Incorporation of the Humane Society of Naples, Inc.

FURTHER THE AFFIANT SAYETH NOT . . .

DATED, this the 20 day of March, 1962.

Wm. Walter Keller
President

ATTEST:

Charles E. Thompson
Secretary

SWORN TO AND SUBSCRIBED before me this the 20 day of March, 1962.

(NOTARY SEAL)

Thomas R. Lusk
Notary Public

My Commission Expires:

12 Dec 1964

APPROVED AND FILED
John D. Jones

RECEIVED
MAR 5 1962
CLERK OF DISTRICT COURT
NAPLES, FLORIDA

AMENDMENTS TO
ARTICLES OF INCORPORATION

of
HUMANE SOCIETY OF NAPLES, INC.

RECEIVED
APR 5 12 54 PM '62
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II - is amended to read as follows:

The principal purpose for which this corporation is organized shall be for the prevention of cruelty to animals, for the protection and to provide for stray and homeless animals and to provide for education of the general public to prevent cruelty to animals. All activities of this organization shall be directed to the furtherance of these purposes and this organization shall not engage in any activities which do not directly advance these purposes.

ARTICLE XI - is amended to read as follows:

Upon dissolution of the Corporation, and prior to the completion thereof, all liabilities and obligations of the Corporation shall be paid, satisfied and discharged and all the remaining assets, property and income owned or held exclusively by the Corporation shall be expended for or applied to the purposes of the Corporation, or one or more of such purposes, exclusively, by transferring and conveying such assets, property and income to one or more corporations or organizations engaged in the prevention of cruelty to animals which activities are substantially similar to those of this Corporation, (no part of the net earnings of which inures to the benefit of any private shareholder or individual, and no substantial part of the activities of which is carrying on propaganda, or otherwise attempting to influence legislation) in accordance with the laws governing not-for-profit corporations of the State of Florida, and no part of such remaining assets, property or income shall be distributed to members or to any other persons whatsoever.

NE 788-4

1962

REPORT OF
CORPORATION NOT FOR PROFIT

Human Society
(name)
of Naples, Inc.

P. O. ADDRESS _____

Filed in the office of the Secretary of State
of the State of Florida, this _____

day of _____

A. D. B. _____

TOM ADAMS, Secretary of State

**CORPORATION NOT FOR PROFIT
REPORT TO THE SECRETARY OF STATE OF FLORIDA**

MAR 27 1962

Provided, that railroad, railroad, telephone, telegraph, insurance, banking and trust corporations, building and loan associations, cooperative associations, CORPORATIONS NOT FOR PROFIT and corporations paying the minimum capital stock tax, shall be required to furnish the information (stated below) required under (a) through (f) of subsection (1) hereof only. (2) All reports herein required shall be for the calendar year and shall be due to be filed on JULY 1 of EACH YEAR. Section 228.22, Florida Statutes, 1953.

Hon. Tom Adams, Secretary of State
Tallahassee, Florida

In accordance with the law above referred to, we submit below information called for:

(1) That THE HUMANE SOCIETY OF NAPLES, INC.
Name of Corporation
duly organized and existing under Chapter 617, Florida Statutes, 1950 as a corporation not for profit with its
home office at NAPLES FLORIDA
City State
COLLIER has designated P.O. Box 451
County Street or Building
City of NAPLES County of COLLIER State of Florida,
as its place of business or domicile for the service of process within the State, and has named as its agent,
SMITH, CARROLL AND VEGA

whose address is SUITE 12, BALCH BUILDING, NAPLES, FLORIDA

(2) NAMES AND ADDRESSES OF OFFICERS (be sure to affix titles):

Name	P. O. Address
<u>Mrs. Walter Keller, President</u>	<u>1542 10th Street, North - Naples, Florida</u>
<u>Mr. Tom Morgan, Jr., Vice-President</u>	<u>626 West Lake Drive - Naples, Florida</u>
<u>Mrs. George Johnson, Sec.-Treas.</u>	<u>1516 10th Street, North - Naples, Florida</u>

(3) NAMES AND ADDRESSES OF DIRECTORS:

Name	P. O. Address
<u>Mrs. G. C. Carter</u>	<u>1976 Galleon Drive - Naples, Florida</u>
<u>Mr. Fred Lowdermilk</u>	<u>114 14th Avenue, South - Naples, Florida</u>
<u>Mr. Tim Cartool</u>	<u>Gulf Acres - Naples, Florida</u>

(4) GENERAL PURPOSE: CORPORATION NOT FOR PROFIT ORGANIZED IS: The protection of animals and provide for all stray and homeless animals, and the prevention of cruelty to any animals by humane education and enforcement of our laws.

(5) Date of last meeting of Board of Directors: February 22, 1962

Has the Corporation been actively engaged in conducting its affairs during the previous twelve months? Yes

If inactive, state how long its charter powers have been dormant

(6) We, the undersigned, certify the above state of facts to be true and correct as shown by our records.

ATTEST: James B. Quinn
Secretary

STATE OF FLORIDA

COUNTY OF Collier

Personally appeared before me Tom Morgan, Jr.
who depose and say that he executed this certificate for and in behalf of said corporation, and that the statements therein contained are true and correct to the best of his knowledge and belief.

Given to the undersigned before me this 20 day of March 1962

DEAL

James B. Quinn
Secretary
Commissioner of Public Relations
Commissioner of Public Relations

POSTMASTER

- Check Boxes for the Delivery
☐ Mailed, left no address
☐ Out of business
☐ No such address
☐ Unknown
☐ Closed for season
☐ Refused

RETURN REQUESTED

Corporation Report for Foreign and Domestic Corporations

(Not For Profit and Exempt (Section 605.32(2), Florida Statutes)

State of Florida
TOM ADAMS
 SECRETARY OF STATE
 Tallahassee, Florida

BULK RATE
 U. S. POSTAGE

PAID

Tallahassee, Fla.
 Permit No. 88

Refer to This Number
 in All Correspondence

HUMANE SOCIETY OF NAPLES INC
~~LOIS MARIE HOUSE~~ Mrs. Walter Keller
~~634 5TH AVE N~~ 1383 12th St. No.
NAPLES FLA

21-07-NP-700988 1966

21C

FILE
 SEC
 1966

1. **HUMANE SOCIETY OF NAPLES, INC.** (Give exact name of corporation)
 2. **Prevention of cruelty to animals** (General nature of business or activity)

3. **P. O. BOX 1451** (Street or Post Office Box of principal place of business)
Naples (City)
Collier (County)
Florida (State)

4. a. **Mrs. Walter Keller** President 1383 12th St. No.
 (Officers-Name) (Title) (Address)
 b. **Mrs. N. L. Wallingford** 1st Vice-Pres. 171 19th Ave. So.
 c. **Mr. Tom Morgan** 2nd Vice-Pres. 888 5th Ave. So.
 d. **Miss Jane Grunwell** Secretary Carriage Club
 e. **Mr. Edward Oates** Treasurer First National Bank
 f.
 g.

5. a. **Col. & Mrs. C. C. Carter** Honorary Chairman Carriage Club
 (Directors-Name) (Law requires at least (3) three)
 b. **Mrs. Denton Woodward** Royal Palm Club
 c. **Mrs. Edwin A. Jones** Beach Club Hotel
 d. **Mr. Fred M. Lowdermilk** 114 11th Ave. So.
 e. **Mr. John H. Slater** 3054 Gordon Drive
 f. **Mrs. Edward Cope Smith** 585 16th Ave. So.
 g. **Mr. & Mrs. E. Clifford Wenzel, Jr.** 3131 Green Dolphin Lane
 6. **MRS. WALTER KELLER** 1383 12th St. No.
 (Resident Agent Name) (Address)

Insurance companies are not to complete item 6 pursuant to Section 624.0221, Florida Statutes.

7. Last meeting of Directors **5-12-66** (Month - Day - Year)
 8. Corporation Active? **Yes** (Yes or No)
 9. If inactive, will corporation begin business in the future? **Yes** (Yes or No)
 10. Date Incorporated **5-20-60** (Month - Day - Year)
 11. Date Qualified in Fla. (Month - Day - Year)

13. If foreign corporation, give the number of States in which you do business.
 facts to be true and correct as shown by our books.

14. We, the undersigned, certify the above statement of

Mrs. Walter Keller, Pres.
 By President or V-President

Attest: *Jane E. Grunwell*
 Secretary

STATE OF **FLORIDA**
 COUNTY OF **COLLIER**

Personally appeared before me *Mrs. Keller and Miss Grunwell*
 who deposes and says that he executed this certificate for and in behalf of said corporation and that the statement herein contained is true and correct to the best of his knowledge and belief.

Sworn to and subscribed before me this **30** day of **June** 19**66**.

(Notary Seal)

John C. Davis
 Signature of Notary Public
 NOTARY PUBLIC, STATE OF FLORIDA
 MY COMMISSION EXPIRES MAY 7, 1969
 SIGNED THROUGH FREE BY MAIL

Send Original to: **TOM ADAMS, SECRETARY OF STATE, TALLAHASSEE, FLORIDA**

(SEE INSTRUCTIONS ON BACK OF LAST COPY)

ORIGINAL

Corporation Report
for Foreign and Domestic Corporations

(Not For Profit and Exempt (Section 508.32(2), Florida Statutes)

FILED
State of Florida
TOM ADAMS

SECRETARY OF STATE

1967 JUL 10 Tallahassee, Florida

Refer to This Number
in All Correspondence

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

21-07-NR-700986

1967

HUMANE SOCIETY OF NAPLES, INC.

MRS. WALTER KELLER
1383 12TH STREET NO.
NAPLES, FLA. 33940

1. HUMANE SOCIETY OF NAPLES, INC.
(Give exact name of corporation)
2. Prevention of cruelty to animals
(General nature of business or activity)
3. P.O. Box 451 Naples Collier Florida
(Street or Post Office Box of principal place of business) (City) (County) (State)
4. Mrs. Walter Keller President & Director 1383 12th St. No.
(Officers Name) (Title) (Address)
- William H. Gracely 1st Vice-Pres. & Dir. 645 Fifth Ave. So.
Tom Morgan 888 Fifth Ave. So.
Miss Josephine D. Wharton 2nd Vice-President 888 Fifth Ave. So.
Edward J. Oates, Jr. Secretary 186 10th Ave. So.
Treasurer & Director First National Bank
5. Mrs. C. C. Carter, Honorary Chairman of the Board Carriage Club
Fred M. Lowdermilk 11h 14th Ave. So.
(Directors Name) (Law requires at least (3) three) (Address)
- Mrs. Edward Cope Smith 3511 Rum Row Bow-Line-Drive
Mrs. Benson Woodward Royal Palm Club
Mrs. N. L. Wallingford 171 19th Ave. So.
Mr. Norman Bower 852 1st Ave. So.
Mrs. Robert Keely, Jr. 730 Springline Drive
Mrs. Joseph Powers 1666 4th St. So.
Mrs. Jane Bingham 1st St. & 5th Ave. No.
MRS. WALTER KELLER 1383 12th St. No.
6. Insurance companies are not to complete item 6 pursuant to Section 824.0221, Florida Statutes.
(John Slater, Honorary Board Dir., 3500 Gordon Drive)
7. Last meeting of Directors June 8, 1967 8. Corporation Active? Yes 9. Inactive began
(Month - Day - Year) (Yes or No) (Month - Day - Year)
10. If inactive, will corporation begin business in the future? 11. Date Incorporated 5-20-60 12. Date Qualified in Fla.
(Yes or No) (Month - Day - Year) (Month - Day - Year)
13. If foreign corporation, give the number of States in which you do business.
facts to be true and correct as shown by our books.
14. We, the undersigned, certify the above statement of

Mrs. Walter Keller
By President or V-President

Attest: Josephine D. Wharton
Secretary

STATE OF Florida
COUNTY OF Collier

Personally appeared before me Mrs. Walter Keller
who deposes and says that he executed this certificate for and in behalf of said corporation and
that the statement herein contained is true and correct to the best of his knowledge and belief.

Sworn to and subscribed before me this 30th day of June 1967.

(Notary Seal)

Signature of Notary Public

NOTARY PUBLIC STATE OF FLORIDA
MY COMMISSION EXPIRES
BORN FRED M. DILLIGUST

Send Original to: TOM ADAMS, SECRETARY OF STATE, TALLAHASSEE, FLORIDA.
(SEE INSTRUCTIONS ON BACK OF LAST COPY)

ORIGINAL

Corporation Report for Foreign and Domestic Corporations

(Not For Profit and Exempt (Section 806.22(2), Florida Statutes)

FILED
State of Florida
TOM ADAMS
SECRETARY OF STATE
Tallahassee, Florida

Refer to This Number
in All Correspondence

1968 NOV - 7 9:36

21-07-NOV-000988

1968

HUMANE SOCIETY OF NAPLES, INC.
MRS. WALTER KELLER
3300 18TH STREET NO. P.O. BOX 451
NAPLES FLA 34104

1. HUMANE SOCIETY OF NAPLES, INC.

(Give exact name of corporation)

(General nature of business or activity)

2. Prevention of cruelty
to animals

3. P. O. Box 451

(Street or Post Office Box of principal place of business)

Naples

(City)

Collier

(County)

Florida

(State)

4. Mrs. Walter Keller

(Officers Name)

(Title)

(Address)

b. Mrs. Walter Keller

President & Director

560 Orchid Drive

c. William H. Gracely

1st Vice-Pres & Dir.

645 Fifth Ave. So.

d. Tom Morgan

2nd Vice-Pres.

888 Fifth Ave. So.

e. Miss Josephine D. Wharton

Secretary

186 10th Ave. So.

f. Edward J. Oates, Jr.

Treasurer & Director

First National Bank

Mrs. C. C. Carter, Honorary Chairman of the Board

5. Fred M. Loudermilk

(Directors - Name) (Law requires at least (3) three)

(Address)

b. Mrs. Edward Cope Smith

114 14th Ave. So.

c. Mrs. Danton Woodward

3511 Rum Row

d. Mrs. H. L. Wallingford

Royal Palm Club

e. Norman Bowes

171 19th Ave. So.

f. Mrs. Jane Bingham

852 1st Ave. So.

6. Mrs. Walter Keller

(Resident Agent Name)

1st St. & 5th Ave. No.

(Address)

Insurance companies are not to complete item 6 pursuant to Section 624.0221, Florida Statutes.

7. Last meeting of Directors June 6 1968

(Month - Day - Year)

8. Corporation Active? Yes

(Yes or No)

If inactive

9. inactivity began

(Month - Day - Year)

10. If inactive, will corporation
begin business in the future?

(Yes or No)

11. Date Incorporated 5-20-60

(Month - Day - Year)

12. If foreign corporation,
Date Qualified in Fla.

(Month - Day - Year)

13. If foreign corporation, give the number
of States in which you do business.

facts to be true and correct as shown by our books.

14. We, the undersigned, certify the above statement of

Mrs. Walter Keller
By President or V-President

Attest: *Josephine D. Wharton*
Secretary

STATE OF FLORIDA
COUNTY OF COLLIER

Person Ily appeared before me Mrs. Walter Keller
who deposes and says that he executed this certificate for and in behalf of said corporation and
that the statement herein contained is true and correct to the best of his knowledge and belief.

Sworn to and subscribed before me this 5th day of November 1968.

(Notary Seal)

Signature of Notary (taking acknowledgment)

NOTARY PUBLIC, STATE of FLORIDA at LARGE
MY COMMISSION EXPIRES MAR. 7 1969

NOTED THROUGH FILED W. HIGHTSLEY

OF STATE, TALLAHASSEE, FLORIDA.

CK OF LAST COPY)

ORIGINAL

NP

9

88

NP 988

NP#988

HUMANE SOCIETY OF COLLIER
COUNTY, INC.

Amend changing its name FROM
HUMANE SOCIETY OF NAPELS, INC.

FILED IN OFFICE OF DEPARTMENT
OF STATE, STATE OF FLORIDA.

by df, on 2/20/73

RICHARD (DICK) STONE
SECRETARY OF STATE

corp-1



RICHARD (DICK) STONE
SECRETARY OF STATE

STATE OF FLORIDA
Department of State
THE CAPITOL
TALLAHASSEE 32304

ROY L. ALLEN, DIRECTOR
DIVISION OF CORPORATIONS
904/488-5140
(TWX) 810/981-3677

William H. Gracely, Esquire
Post Office Box 1796
Naples, Florida 33940

February 21, 1973

Dear Sir,

Subject: FLORIDA SOCIETY OF SULLY COUNTY, INC.

A refund for \$ is enclosed for the reason checked:

1. Withdrawal of charter.
2. Overpayment of filing fee.
3. Charter not of record in this office.
4. X Overpayment of certification fee.
5. Filing fee previously paid.
6. No fee required.
7. No response to our letter of
8. Overpayment of charter tax.
9. Comments:

If you have any questions regarding this matter, please let us know.

corp-77
1-5-71

REQUISITION FOR REFUND

This money was originally received per validator stamp as follows:

<u>2/15/73</u>	<u>103800</u>	<u>1</u>	<u>7</u>	<u>10</u>
Date	Validation No.	Machine No.	Dept. No.	Amount

Requested by:

(Head of Department)

For use by Fiscal Department

Paid by Revolving Fund Check No.

Dated

Amount

gen-1
4-30-63

WILLIAM H. GRACELY
ATTORNEY AT LAW
P. O. BOX 1786
NAPLES, FLORIDA 33940
813-649-6617

12 February 1973

Department of Revenue
Tallahassee
Florida 32304

In re: Humane Society of Naples, Inc.

Gentlemen:

Relative to the above I enclose the following:

- (1) my check in the amount of \$25.00
- (2) 2 signed copies of Certificate.

Please return to me one certified copy of the filed amendment to the articles.

FEB 1973 103900 ****10.0

FEB 1973 103800 ****15.0

Sincerely yours,

William H. Gracely

WHG:r

PRIVILEGE TAX	
G. TAX	
FINING	15.00
C. COPY	10.00
R. A. FEE	
P. COPY	
SEARCH	
TOTAL	25.00
BALANCE DUE	5
REFUND	

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA
FEB 20 5 30 PM '73

FILED

Name Change
Amendment

CC #5

CERTIFICATE

LOIS KERCKHOFF and VIRGINIA POST do hereby certify as follows:

- (1) They, respectively, are the duly elected, qualified and acting President and Secretary of the HUMANE SOCIETY OF NAPLES, INC., a Florida non-profit corporation;
- (2) At the annual meeting of the membership, held on 26 January 1973, in the City of Naples, Florida, a quorum was present; and
- (3) At such annual meeting, a majority of the members voted in favor of the amendment to the Articles of Incorporation, a true copy of such amendment being attached to this Certificate and made a part of this Certificate by this reference, and such amendment thereupon was duly and properly adopted by the members.

EXECUTED at Naples, Florida, this 29th day of January, 1973.

Lois Kerckhoff
Lois Kerckhoff, President
Virginia Post
Virginia Post, Secretary

STATE OF FLORIDA
COLLIER COUNTY

I HEREBY CERTIFY that on this day, before me, a Notary Public duly authorized in the State and County named above to take acknowledgments, personally appeared LOIS KERCKHOFF and VIRGINIA POST, President and Secretary, respectively, of the HUMANE SOCIETY OF NAPLES, INC., a Florida non-profit corporation, to me known to be such persons and such officers, and they acknowledged before me that they executed the foregoing Certificate, in the respective capacities indicated, for the uses and purposes therein set forth.

WITNESS my hand and official seal, in the State and County named above, this 9th day of February, 1973.

Enrique J. Bryant
NOTARY PUBLIC

My commission expires March 8, 1974.

AMENDMENT TO THE
ARTICLES OF INCORPORATION
OF
HUMANE SOCIETY OF NAPLES, INC.

ARTICLE I IS HEREBY AMENDED TO READ AS FOLLOWS:

"I.

The name of this Corporation shall be the HUMANE SOCIETY OF
COLLIER COUNTY, INC."

ARTICLE VI IS HEREBY AMENDED TO READ AS FOLLOWS:

"VI.

The affairs of this Corporation shall be conducted by a
Board of Directors composed of not less than six nor more than fifteen
members. The officers shall be: President, Vice President, Secretary
and Treasurer. The President and Vice President shall be Directors.
The Secretary and Treasurer may, but need not, be Directors. At the
annual meeting of the membership, all vacancies in the Board of Direc-
tors and all officers shall be elected. Any vacancy in the Board of
Directors or in any office, taking place during the year, shall be
filled by a majority vote of the Board of Directors."

ARTICLE IX is hereby amended to read as follows:

"IX.

The highest amount of indebtedness or liability to which
this Corporation may subject itself shall be \$250,000.00."

ARTICLE X IS HEREBY AMENDED TO READ AS FOLLOWS:

"X.

The amount of real estate which this Corporation may own
shall not exceed \$250,000.00 in value."

JUL 30-74 1

081*****2.00

RICHARD (DICK) STONE
Secretary of State
THE CAPITOL
TALLAHASSEE, FLA.
32304

STATE OF FLORIDA
DEPARTMENT OF STATE
PRIVILEGE TAX RETURN
FOR CORPORATIONS & OTHER ENTITIES

HUMANE SOCIETY OF COLLIER COUNTY, INC.
Mr. William H. Gracely
474 Fifth Avenue South, P. O. Box 1796
Naples, Florida 33940

A700988

DATE DUE: JAN. 1, 1972

DATE DELINQUENT: MAR. 1, 1972

PLEASE TYPE

Change Mailing Address to: (same as above)

Zip

(Exact Corporate Name)

Fed. Emp. I.D. No.

1. HUMANE SOCIETY OF COLLIER COUNTY, INC.

2. 59-1033966

(Street Address of Principal Office in Fla.)

(City)

(County)

(State)

(Zip)

3. Airport Road

Naples

Collier

Florida

33940

4.(a) Mrs. Lois O. Kerckhoff, President, 2340 Gordon Dr., Naples, Florida 33940
(b) Mr. William H. Gracely, Vice President, 474 5th Ave. S., Naples, Florida 33940
(c) Mrs. Carl Post, Secretary, 3231 Green Dolphin Lane, Naples, Florida 33940
(d) Mr. Edward J. Oates, Jr., Treasurer, 1010 5th Ave. S., Naples, Florida 33940

5.(a) Mrs. Lois O. Kerckhoff, Director, 2340 Gordon Dr., Naples, Florida 33940
(b) Mr. William H. Gracely, Director, 474 Fifth Ave. S., Naples, Florida 33940
(c) Mrs. Carl Post, Director, 3231 Green Dolphin Lane, Naples, Florida 33940
(d) Mr. Edward J. Oates, Jr., Director, 1010 5th Ave. S., Naples, Florida 33940

6. Mr. William H. Gracely, P. O. Box 1796, 474 5th Ave. S., Naples, Florida 33940

7. General Nature of Business see 10.

8. Date Formed or Incorporated 5/20/60

9. If Foreign Corporation, Date Qualified in Florida / /

10. Capital Stock (or number and book value of all certificates of interest or participation):

Class or Type	Par or Stated Value	Shares Authorized	Number	Book Value
(a) This is a non-profit Florida corporation and does not have				\$
(b) stock. This corporation is organized for the prevention of				\$
(c) cruelty to animals.				\$
(d)				\$
(e) Total Book Value of Stock (Certificates) Issued				\$

11. If you do not have Capital Stock, describe the general rules applicable to all members by which the property rights and interests of each are determined. Membership is available to anyone interested in Humane Society work, but members have no property rights in the corporation.

12. Close of annual accounting period for this return 12/31/72

13. I/We declare that all Florida documentary stamp taxes applicable to corporate stock (or certificates of interest or participation) transactions for the 12 month period ending Dec. 31 have been paid as required under Chapter 201, Florida Statutes, and I/We further declare that this return is true and correct.

(Corporate Seal)

(Corporate Name)

Attest:

Secretary or Assistant Secretary

By:

William H. Gracely, Vice President

Return Original (with Tax Payment) to DEPARTMENT OF STATE
THE CAPITOL
TALLAHASSEE, FLORIDA 32304

READ INSTRUCTIONS ON BACK

PRIVILEGE TAX \$2.00
PROFIT ENTITIES \$5.00
NON-PROFIT ENTITIES \$2.00

READ INSTRUCTIONS ON BACK

PRIVILEGE TAX \$2.00
PROFIT ENTITIES \$5.00
NON-PROFIT ENTITIES \$2.00

RICHARD (DICK) STONE
SECRETARY OF STATE
The Capitol
Tallahassee, Florida 32304

State of Florida
Department of State
ANNUAL REPORT
for Corporations and Other Entities

JUL 30 1973 *****2.00

ADDRESS CORRECTION
REQUESTED

DATE DUE: JAN. 1, 1973

DATE DELINQUENT: MAR. 1, 1973

Please refer to this number for future correspondence
regarding this corporation

NAME:	HUMANE SOCIETY OF COLLIER COUNTY, INC.			700988	
ADDRESS:	Mr. William H. Gracely 474 Fifth Avenue South P. O. Box 1796				
CITY:	Naples	STATE:	Florida	ZIP:	33940

PLEASE TYPE

CHANGE MAILING ADDRESS TO:	(same as above)	Zip
----------------------------	-----------------	-----

1. HUMANE SOCIETY OF COLLIER COUNTY, INC.	2. 59-1033966			
(Exact Corporate Name)	Fed. Emp. I.D. No.			
3. Airport Road	Naples	Collier	Florida	33940
(Street Address of Principal Office in Fla.)	(City)	(County)	(State)	(Zip)
(Officers Names)	(Title)	(Street Address)	(City)	(State)
4. (a) Mrs. Lois O. Kerckhoff, President,	2340 Gordon Dr.,	Naples, Florida	33940	
(b) Mr. William H. Gracely, Vice President,	474 5th Ave. S.,	Naples, Florida	33940	
(c) Mrs. Carl Post, Secretary,	3231 Green Dolphin Lane,	Naples, Florida	33940	
(d) Mr. Edward J. Oates, Jr., Treasurer,	1010 5th Ave. S.,	Naples, Florida	33940	
(Directors, Trustees, Managers)	(Street Address)	(City)	(State)	
5. (a) Mrs. Lois O. Kerckhoff, Director,	2340 Gordon Dr.,	Naples, Florida	33940	
(b) Mr. William H. Gracely, Director,	474 5th Ave. S.,	Naples, Florida	33940	
(c) Mrs. Carl Post, Director,	3231 Green Dolphin Lane,	Naples, Florida	33940	
(d) Mr. Edward J. Oates, Jr., Director,	1010 5th Ave. S.,	Naples, Florida	33940	
(Florida Resident Agent Name)	(Florida Street Address)	(City)	(Zip)	
6. Mr. William H. Gracely,	P. O. Box 1796, 474 5th Ave. S.,	Naples, Florida	33940	

7. General Nature of Business	8. Date Formed or Incorporated	9. If Foreign Corporation, Date Qualified in Florida
See page 2	5 / 20 / 60 MO DA YR	/ / MO DA YR

10. Capital Stock (or number and book value of all certificates of interest or participation):	SHARES ISSUED			
Class or Type	Par or Stated Value	Shares Authorized	Number	Book Value
(a) This is a non-profit Florida corporation and does not have				\$
(b) stock. This corporation is organized for the prevention of				\$
(c) cruelty to animals.				\$

11. If you do not have Capital Stock, describe the general rules applicable to all members by which the property rights and interests of each are determined: Membership is available to anyone interested in Humane Society work, but members have no property rights in the corporation.

12. Fiscal close of accounting period 12 / 31
MO DA

13. I/WE declare that all Florida documentary stamp taxes applicable to corporate stock (or certificates of interest or participation) transactions for the 12 month period ending Dec. 31, 1972 have been paid as required under Chapter 201, Florida Statutes, and I/WE further declare that this report is true and correct.

(Corporate Seal)	HUMANE SOCIETY OF COLLIER COUNTY, INC.
Attest:	(Corporate Name)
Secretary or Assistant Secretary	By: <u>William H. Gracely</u> Vice President

Return Original (with Filing Fee) to DEPARTMENT OF STATE
DRAWER 18
THE CAPITOL
TALLAHASSEE, FLORIDA 32304

READ INSTRUCTIONS ON BACK

FILING FEE PER NON-PROFIT ENTITY \$2.00

PER PROFIT ENTITY \$5.00

REPORT FOR YEAR 1974

FD 30-74 1 081*****2.00

(1) 700986
CHARTER NUMBER

(2) 20 May 1960
DATE INC. OR IF FOREIGN
DATE QUALIFIED IN FLA.

ANNUAL REPORT FOR CORPORATIONS AND OTHER ENTITIES

VALIDATION AREA - DO NOT WRITE IN THIS SPACE

(3)
EXACT
NAME

HUMANE SOCIETY OF COLLIER COUNTY, INC.
474 Fifth Avenue South - P. O. Box 1796
Naples, Florida 33940

(4) FED. EMP. I.D. NO. 59-1033966

(5) SICC
(SEE PAGE 4)

(6)
RESIDENT
AGENT

William H. Gracely
474 Fifth Avenue South - P. O. Box 1796
Naples, Florida 33940

(7) OFFICERS/DIRECTORS NAMES

CITY / STATE

SEE ATTACHED LIST

(8) FISCAL CLOSE OF ACCOUNTING PERIOD 12

(9)
MAILING
ADDRESS

HUMANE SOCIETY OF COLLIER COUNTY, INC.
Mr. William H. Gracely
474 Fifth Avenue South, P. O. Box 1796
Naples, Florida 33940

(10) PRIMARY STOCK

AUTH. STK. NONE PAR VALUE -0-

I DECLARE THAT ALL FLORIDA DOCUMENTARY STAMP TAXES APPLICABLE TO CORPORATE STOCK (ON CERTIFICATES OF INTEREST OR PARTICIPATION) TRANSACTIONS DURING THE PREVIOUS YEAR HAVE BEEN PAID AS REQUIRED BY CHAPTER 201, FLORIDA STATUTES; I FURTHER DECLARE THAT I AM THE AUTHORIZED PERSON TO SIGN THE REPORT FOR THIS ENTITY AND THAT IT IS TRUE AND CORRECT.

AUTHORIZED SIGNATURE

Vice

(11) TITLE President

TEL NO. 649-6617

SECRETARY OF STATE
RICHARD (DICK) STONE
P.O. BOX 6327
TALLAHASSEE, FLA. 32301

DUE JAN 1, 74

DELINQUENT JULY 1, 74

CORP-ART4

PAGE 1

CORRECTIONS AND ADDITIONAL INFORMATION-PLEASE TYPE

(4a)

FED. EMPLOYER ID. NO.

(5a)

SICC 9999
(SEE PAGE 4)

(6a)

(7a)

OFFICERS/DIRECTORS

STREET ADDRESS

TITLE

- IF ADDITIONAL OFFICERS/DIRECTORS, ATTACH ADDENDUM SHEET -

(8a)

FISCAL CLOSE OF ACCOUNTING PERIOD (MONTH)

(9a)

(9b)

STREET

ADDRESS

(10a)

CAPITAL STOCK FOR NUMBER & BOOK VALUE OF ALL CERTIFICATES OF INTEREST OR PARTICIPATION
CLASS OR TYPE PAR. NO. PAR. OR STATED VALUE SHARES AUTHORIZED NUMBER BOOK VALUE

(11) This is a non-profit corporation without stock \$

(10b)

(12) IF YOU DO NOT HAVE CAPITAL STOCK, DESCRIBE THE GENERAL RULES APPLICABLE TO ALL MEMBERS BY WHICH THE PROPERTY RIGHTS AND INTERESTS OF EACH ARE DETERMINED

(12)

RESIDENT
AGENT SIGNATURE

(IF DIFFERENT FROM NO. 3 (ABOVE))

PLEASE READ INSTRUCTIONS ON PAGE 2
FILING FEES \$5.00 PROFIT ENTITY \$2.00 NON PROFIT

ADDENDUM - OFFICERS AND DIRECTORS
ANNUAL REPORT FOR CORPORATIONS AND OTHER ENTITIES
HUMANE SOCIETY OF COLLIER COUNTY, INC.

<u>OFFICERS/DIRECTORS</u>	<u>STREET ADDRESS</u>	<u>TITLE</u>
Mrs. Lois O. Kerckhoff	2340 Gordon Drive Naples, Florida 33940	President and Director
Mr. William H. Gracely	P. O. Box 1796 474 Fifth Avenue, South Naples, Florida 33940	Vice President and Director
Mrs. Carl Post	3231 Green Dolphin Lane Naples, Florida 33940	Secretary and Director
Mr. Edward J. Oates, Jr.	People's National Bank 1010 Fifth Avenue, South Naples, Florida 33940	Treasurer and Director
Mrs. Lori Keller	560 Orchid Drive Naples, Florida 33940	Director
Mr. Kenneth Benta	533 Yellowbird Street Marco, Florida 33937	Director
Mrs. John Bingham	P. O. Box 975 Naples, Florida 33940	Director
Dr. William O. Webb	2626 Tamiami Trail, East Naples, Florida 33940	Director
Mrs. Earl E. Fisher	3951 Gulf Shore Blvd., N. Naples, Florida 33940	Director
Mr. Fred M. Lowdermilk	114 14th Avenue South Naples, Florida 33940	Director
Mr. Winfield Perdun	750 Admiralty Parade Naples, Florida 33940	Director
Mrs. James E. Doane	1857 Galleon Drive Naples, Florida 33940	Director
Mrs. Louise R. Powers	207 Harbour Drive - Apt. 11 Naples, Florida 33940	Director
Mr. Justus I. Wakelee	4115 Cutlass Lane Naples, Florida 33940	Director
Dr. Robert Dilbone	Naples Animal Hospital P. O. Box 86 Naples, Florida 33940	Director

141

ANNUAL FILING FEES
\$5.00-PROFIT CORP.
\$2.00-NON-PROFIT CORP.

CORPORATION
ANNUAL REPORT

FEB 10-75 1 099*****2.00

REMIT THIS FORM
& FILING FEE TO:

SECRETARY OF STATE
THE CAPITOL
TALLAHASSEE, FLORIDA
32304

DUE--JAN. 1

DELINQUENT--JULY 1

VALIDATION AREA - DO NOT WRITE IN THIS SPACE

1 700988 4

2 05/20/1960

3 SICC SEE ENVELOPE BACK 9999

4 FED. EMPLOYER ID. NO. 59-1033966

5 FISCAL CLOSE OF ACCOUNTING PERIOD (MO) 12

6a CHANGE TO:

7 1974

8 1975

YEAR OF LAST REPORT FILED IN THIS OFFICE

YEAR(S) THIS REPORT COVERS

6 HUMANE SOCIETY OF COLLIER COUNTY, INC.
EXACT NAME

7 IF RESIDENT AGENT AND/OR ADDRESS IS DIFFERENT, WRITE THIS OFFICE AT THE ABOVE ADDRESS FOR PROPER FORMS.
RESIDENT AGENT AND STREET ADDRESS
WILLIAM H. GRACELY
474 FIFTH AVENUE SOUTH - P.O. BOX 1796
NAPLES, FLORIDA 33940

DO NOT WRITE IN THIS SPACE
FOR DIVISION USE ONLY
JAN 29 11 37 PM 1975
RECEIVED
OFFICE OF STATE
TALLAHASSEE, FLORIDA
bm

PLEASE READ INSTRUCTIONS ON BACK

8 700988
HUMANE SOCIETY OF COLLIER COUNTY, INC.
MR. WILLIAM H. GRACELY
474 FIFTH AVENUE SOUTH, P.O. BOX 1796
NAPLES FLA 33940
8a CHANGE TO:
NO P.O. BOX

9 OFFICERS/DIRECTORS NAMES STREET ADDRESS CITY / STATE TITLE(S)
KERCKHOFF, LOIS G. 2340 Gordon Drive NAPLES, FL PRES DL
GRACELY, WILLIAM H. 474 Fifth Ave. S. (P. O. 1796) NAPLES, FL V.P. DIR
POST, GENE Virginia 3231 Green Dolphin Lane NAPLES, FL SEC DIR
Oates, Edward J., Jr. 10-10 Fifth Avenue South Naples, FL Treas Dir

10 CAPITAL STOCK
NO CAPITAL STOCK
FLORIDA NON-PROFIT CORPORATION

10a CAPITAL STOCK (OR NUMBER & BOOK VALUE OF ALL CERTIFICATES OF INTEREST OR PARTICIPATION)
CLASS OR TYPE PAR OR FAN OR STATE VALUE SHARES AUTHORIZED NUMBER BOOK VALUE
11 IF YOU DO NOT HAVE CAPITAL STOCK, DESCRIBE THE GENERAL RULES APPLICABLE TO ALL MEMBERS BY WHICH THE PROPERTY RIGHTS AND INTERESTS OF EACH ARE DETERMINED

I DECLARE THAT ALL FLORIDA DOCUMENTARY STAMP TAXES APPLICABLE TO CORPORATE STOCK (OR CERTIFICATES OF INTEREST OR PARTICIPATION) TRANSACTIONS DURING THE PREVIOUS YEAR HAVE BEEN PAID AS REQUIRED BY CHAPTER 201, FLORIDA STATUTES; I FURTHER DECLARE THAT I AM THE AUTHORIZED PERSON TO SIGN THE REPORT FOR THIS ENTITY AND THAT IT IS TRUE AND CORRECT.
AUTHORIZED SIGNATURE William H. Gracely
TITLE Vice President
DATE 16 January 1975
TEL. NO. 813-649-6617

CORP-AR75

1 700984
CHARTER NUMBER

2 20 May 1960
DATE INC. OR IF FOREIGN
DATE QUALIFIED IN FLA.

3
EXACT
NAME

HUMANE SOCIETY OF COLLIER COUNTY, INC.
474 Fifth Avenue South - P. O. Box 1796
Naples, Florida 33940

4 FED. EMP. I.D. NO. 59-1033966

5 SICC
(SEE PAGE 4)

6
RESIDENT
AGENT

William H. Gracely
474 Fifth Avenue South - P. O. Box 1796
Naples, Florida 33940

7 OFFICERS/DIRECTORS NAMES

CITY / STATE

SEE ATTACHED LIST

8 FISCAL CLOSE OF ACCOUNTING PERIOD 12

9
MAILING
ADDRESS

HUMANE SOCIETY OF COLLIER COUNTY, INC.
Mr. William H. Gracely
474 Fifth Avenue South, P. O. Box 1796
Naples, Florida 33940

10 PRIMARY STOCK

AUTH. STK. NONE PAR VALUE -0-

I DECLARE THAT ALL FLORIDA DOCUMENTARY STAMP TAXES APPLICABLE TO CORPORATE STOCK (OR CERTIFICATES OF INTEREST OR PARTICIPATION) TRANSACTIONS DURING THE PREVIOUS YEAR HAVE BEEN PAID AS REQUIRED BY CHAPTER 201, FLORIDA STATUTES; I FURTHER DECLARE THAT I AM THE AUTHORIZED PERSON TO SIGN THE REPORT FOR THIS ENTITY AND THAT IT IS TRUE AND CORRECT.

AUTHORIZED SIGNATURE

11 TITLE President

TEL. NO. 649-6617

ANNUAL REPORT FOR CORPORATIONS AND OTHER ENTITIES

VALIDATION AREA - DO NOT WRITE IN THIS SPACE

AL -2-74 1 293*****2.00

SECRETARY OF STATE
RICHARD (DICK) STONE
P.O. BOX 6327
TALLAHASSEE, FLA. 32301

DUE JAN 1.

DELINQUENT JULY 1.

CORP-ART4

PAGE 1

CORRECTIONS AND ADDITIONAL INFORMATION-PLEASE TYPE

4a FED. EMPLOYER ID. NO.

5a SICC
(SEE PAGE 4)

6a

7a

OFFICERS/DIRECTORS

STREET ADDRESS TITLE

IF ADDITIONAL OFFICERS/DIRECTORS, ATTACH ADDENDUM SHEET

8a FISCAL CLOSE OF ACCOUNTING PERIOD (MONTH)

9a

9b

STREET

10a

ADDRESS
CAPITAL STOCK OR NUMBER & BOOK VALUE OF ALL CERTIFICATES OF INTEREST OR PARTICIPATION
CLASS OR TYPE PAR, NO. PAR, OR STATED VALUE SHARES AUTHORIZED NUMBER BOOK VALUE

10c

(1) This is a non-profit corporation without stock \$
(2) IF YOU DO NOT HAVE CAPITAL STOCK, DESCRIBE THE GENERAL RULES APPLICABLE TO ALL MEMBERS BY WHICH THE PROPERTY RIGHTS AND INTERESTS OF EACH ARE DETERMINED

12

RESIDENT
AGENT SIGNATURE

(IF DIFFERENT FROM NO. 6 (ABOVE))

PLEASE READ INSTRUCTIONS ON PAGE 2
FILING FEES \$5.00 PROFIT ENTITY \$2.00 NON PROFIT

ADDENDUM - OFFICERS AND DIRECTORS
ANNUAL REPORT FOR CORPORATIONS AND OTHER ENTITIES
HUMANE SOCIETY OF COLLIER COUNTY, INC.

<u>OFFICERS/DIRECTORS</u>	<u>STREET ADDRESS</u>	<u>TITLE</u>
Mrs. Lois O. Kerckhoff	2340 Gordon Drive Naples, Florida 33940	President and Director
Mr. William H. Gracely	P. O. Box 1796 474 Fifth Avenue, South Naples, Florida 33940	Vice President and Director
Mrs. Carl Post	3231 Green Dolphin Lane Naples, Florida 33940	Secretary and Director
Mr. Edward J. Oates, Jr.	People's National Bank 1010 Fifth Avenue, South Naples, Florida 33940	Treasurer and Director
Mrs. Lori Keller	560 Orchid Drive Naples, Florida 33940	Director
Mr. Kenneth Benta	533 Yellowbird Street Marco, Florida 33937	Director
Mrs. John Bingham	P. O. Box 975 Naples, Florida 33940	Director
Dr. William O. Webb	2626 Tamiami Trail, East Naples, Florida 33940	Director
Mrs. Earl E. Fisher	3951 Gulf Shore Blvd., N. Naples, Florida 33940	Director
Mr. Fred M. Lowdermilk	114 14th Avenue South Naples, Florida 33940	Director
Mr. Winfield Perdun	750 Admiralty Parade Naples, Florida 33940	Director
Mrs. James E. Doane	1857 Galleon Drive Naples, Florida 33940	Director
Mrs. Louise R. Powers	207 Harbour Drive - Apt. 11 Naples, Florida 33940	Director
Mr. Justus I. Wakelee	4115 Cutlass Lane Naples, Florida 33940	Director
Dr. Robert Dilbone	Naples Animal Hospital P. O. Box 86 Naples, Florida 33940	Director

CORPORATION ANNUAL REPORT

FEB-4th 1976 -132500-***5.00

DEFERRED

DELINQUENT

VALIDATION AREA (DO NOT WRITE IN THIS SPACE)

① **700988**
CHARTER NUMBER

4

② **05/20/1968**
DATE INC. OR IF FOREIGN
DATE QUALIFIED IN FLA.

③ **0909**
SICC SEE ENVELOPE BACK

③a CHANGE TO:

1975 YEAR OF LAST REPORT
FILED IN THIS OFFICE

1976 YEAR(S) THIS REPORT
COVERS

④ **50-1033966**
FED. EMPLOYER ID. NO.

④a CHANGE TO:

⑤ **ELBERT SOCIETY OF COLLIER COUNTY, INC.**

EXACT
NAME

PLEASE READ INSTRUCTIONS ON BACK

⑥ **700988**
ELBERT SOCIETY OF COLLIER COUNTY, INC.
P.O. WILLIAM H. GRACELY
474 FIFTH AVENUE SOUTH, P.O. BOX 1796
NAPLES FLA 33940

ADDRESS

⑥a **STREET ADDRESS CHANGE**

⑦ **WILLIAM H. GRACELY**
474 FIFTH AVENUE SOUTH - P.O. BOX 1796
NAPLES, FLORIDA 33940

REGISTERED
AGENT
AND
STREET
ADDRESS

⑦a **REGISTERED AGENT NAME CHANGE
AND/OR ADDRESS CHANGE
INCLUDE REGISTERED OFFICE ADDRESS**

⑧ NAMES OF ALL OFFICERS AND DIRECTORS	STREET ADDRESS	CITY / STATE	TITLES MUST BE SHOWN
~~XXXXXXXXXXXXXXX~~	2340 Gordon Drive	NAPLES, FL	PRES "10"
TRAVIS, LOIS O.			
GRACELY, WILLIAM H.	474 Fifth Avenue South	NAPLES, FL	V.P. "10"
~~XXXXXXXXXXXXXXX~~	~~XXXXXXXXXXXXXXX~~	NAPLES, FL	SEC DIR
DAVIS, MARY F.	1240 Delmar Lane		
WATTS, EDWARD I, JR.	1010 Fifth Avenue South	NAPLES, FL	TOLE DIR

I CERTIFY THAT I AM AN OFFICER OF THIS CORPORATION EMPowered TO EXECUTE THIS REPORT AS REQUIRED BY CHAPTER 607, FLORIDA STATUTES. I FURTHER CERTIFY THAT I UNDERSTAND MY SIGNATURE ON THIS REPORT SHALL HAVE THE SAME LEGAL EFFECT AS IF MADE UNDER OATH.

SIGNATURE

William H. Gracely

TITLE **Vice President**

TEL. NO **813-649-6617**

DATE **28 January 1976**

CORP-AR75

SEE IMPORTANT DISSOLUTION NOTICE ON OTHER SIDE



STATE OF FLORIDA
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
CORPORATION ANNUAL REPORT

1977

Bruce A. Smithers
Secretary of State

Form COR 620

THIS REPORT MUST BE ACCOMPANIED BY A \$5 FEE.

APPROVED
AND
FILED

JAN 22-77

399*

FEB 7 10 45 AM 1977

▶ **READ NOTICE AND INSTRUCTIONS ON OTHER SIDE OF REPORT** ◀

FLORIDA DEPT. OF STATE
CORPORATIONS DIVISION
TALLAHASSEE, FLORIDA

1. Name and Address of Corporation Principal Office:

700988 HUMANE SOCIETY OF
COLLIER COUNTY, INC.
MR. WILLIAM H. GRACEY
474 FIFTH AVENUE SOUTH, P.O. BOX
NAPLES FLA 33940

If above address is incorrect in any way, enter the correct address
in Item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office.
P.O. Box Number Alone is NOT Sufficient.

Street Address

P.O. Box No.
1796

City

State

Zip Code

3. Date Incorporated or Qualified
To Do Business in Florida

05/20/1960

4. Federal Employer
Identification Number
(FEIN)

59-1033966

5. Date of
Last Report

1976

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Director (x)	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
TRAVERS, LOIS D.	DIR	DIR	2340 GORDON DRIVE	NAPLES, FL
GRACEY, WILLIAM H.	V.P.	DIR	474 FIFTH AVE. SOUTH	NAPLES, FL
DAVIS, MARY F.	SECT.	DIR	1240 DELMAR LANE	NAPLES, FL
DATES, EDWARD J., JR.	TREAS	DIR	1010 FIFTH AVE. SOUTH	NAPLES, FL
THOMAS, GAY	PRES.	DIR	2180 SHEEPHEAD DRIVE	NAPLES, FL

7. Registered
Agent
InformationName
WILLIAM H. GRACEY

Street Address (Do NOT Use P.O. Box Number)

City, State and Zip Code

474 FIFTH AVENUE SOUTH - P.O. BOX 80

NAPLES, FLORIDA 33940

If you wish to change
Registered Agent on
this form, enter all
new information here

Name

Street Address (Do NOT Use P.O. Box Number)

City, State and Zip Code

8. An officer of the Corporation must sign this report. This report must be signed by one of the following. The President, Vice President, Secretary, Assistant Secretary or Treasurer or if the Corporation is in the hands of a receiver or trustee, shall be executed on behalf of the Corporation by the receiver or trustee.

No Other Titles Will Be Accepted. Your Report Will Be Returned If It Does NOT Bear An Authorized Signature.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report
as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall
Have the Same Legal Effect As if Made Under Oath.

Typed Name of Signing Officer

Title

Telephone Number

William H. Gracey

Vice President

262-1009

Signature

Date

3 January 1976

THIS REPORT MUST BE ACCOMPANIED BY THE \$5 FEE

corp-32

NP # 988

Handwritten signature

HUMANE SOCIETY OF COLLIER COUNTY, INC.

☒ New Corporation ☐ Reincorporation ☐ Amendment (\$617.02)

Filed: May 20, 1960

By:

ORIGINAL NAME: HUMANE SOCIETY OF NAPLES, INC.

- (A) RA filed 6/20/60
- (B) Exempt Tax Report filed 2/8/61
- (C) AMEND Art II and XI filed 5 April 1962
- (D) NP CORP RPT FIL Mar 27, 1962
- (E) NP CORP RPT filed Jul 9, 1963
- (F) Amend Arth Pres name filed 2/20/73

Handwritten initials

STATE OF FLORIDA
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
CORPORATION ANNUAL REPORT
1977



Bruce A. Smathers
Secretary of State

THIS REPORT MUST BE ACCOMPANIED BY A \$10 FEE (Form COR 620) 12-1-77

AND
FILED

JUN 30 9 00 AM 1978

FLORIDA DEPT. OF STATE
CORPORATIONS DIVISION
TALLAHASSEE, FLORIDA

READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES

Name and Address of Corporation Principal Office:

700988 HUMANE SOCIETY OF
COLLIER COUNTY, INC.
MR. WILLIAM H. GRACEY
474 FIFTH AVENUE SOUTH, P.O. BOX
NAPLES FLA 33940

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office, ***
P.O. Box Number Alone is NOT Sufficient.

Street Address

P.O. Box No.

City

Summary

Zig Code

3. Date Incorporated or Qualified To Do Business in Florida

05/20/1960

4. Federal Employer Identification Number (FEIN)

59-1083966

5. Date of Last Report

1977

6. **Names and Street Addresses of Each Officer and Director**

Names of Officers and Directors	Title	Director (x)	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
THOMAS, GAY	Pres ~~DOX~~	Dir	2180 SHEEPSHEAD DRIVE	NAPLES, FL
GRACELY, WILLIAM H.	VPres ~~DOX~~	Dir	476 FIFTH AVE., SOUTH	NAPLES, FL
DAVIS, MARY F.	SEC		1240 DELMAR LANE	NAPLES, FL
GATES, EDWARD J., JR.	Treas	Dir	1019 FIFTH AVE. SOUTH	NAPLES, FL
~~XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX~~				
Briggs, James L.	Dir	Dir	643 18th Ave. South	Naples, FL

7. Registered Agent Information

Name **GRACELY, MILCIAH H.**

City, State and Zip Code

NAPLES, FLORIDA 33940

Street Address (Do NOT Use P.O. Box Number)

474 FIFTH AVENUE SOUTH - P.O. BI

**If you wish to change
Registered Agent on
this form, enter all
new information here**

News

Street Address (Do NOT Use P.O. Box Number)

City, State and Zip Code

8. An officer of the Corporation must sign this report. This report must be signed by one of the following: The President, Vice President, Secretary, Assistant Secretary or Treasurer or if the Corporation is in the hands of a receiver or trustee, shall be executed on behalf of the Corporation by the receiver or trustee.

No Other Title Will Be Accepted, Your Report Will Be Returned If It Does NOT Bear An Authorized Signature.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effect As if Made Under Oath.

Typed Name of Signing Officer
William H. Gracely

Title **Vice President**

Telephone Number:
813-262-6617

Signature

Date 24 February 1978

NOTE: THE FILING FEE FOR THE 1978 ANNUAL REPORT IS \$10.

THE FILING FEE FOR THE 1979 ANNUAL REPORT IS \$10.

**CORPORATION
ANNUAL REPORT**



STATE OF FLORIDA
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

1979

THIS REPORT MUST BE ACCOMPANIED BY A \$10 FEE

DO NOT WRITE IN THIS SPACE
JAN 27-79 2 118*****10.00

◀ READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES ▶

1. Name and Address of Corporation Principal Office

700988
HUMANE SOCIETY OF COLLIER COUNTY, INC.
MR. WILLIAM H. GRACELY
474 FIFTH AVENUE SOUTH, P.O. BOX 1796
NAPLES FLA 33940

If above address is incorrect in any way, enter the correct address
in item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient.

Street Address
P.O. Box No.
City
State Zip Code

**3. Date Incorporated or Qualified
To Do Business in Florida**

5/20/1960

**4. Federal Employer
Identification Number
(FEIN)**

59-1033966

**5. Date of
Last Report**

1978

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
THOMAS, BAY	P/O	2180 SHEEPSHEAD DRIVE	NAPLES, FL
GRACELY, WILLIAM H.	V/D	474 FIFTH AVE. SOUTH	NAPLES, FL
DAVIS, HARRY F.	S	1240 DELMAR LANE	NAPLES, FL
DATES, EDWARD J, JR.	T/D	1010 FIFTH AVE. SOUTH	NAPLES, FL
BRIIGGS, JAMES L.	S/D	643 18TH AVE SOUTH	NAPLES, FL

7. Registered Agent Information

If you wish to change Registered Agent on this
form, enter all new information below.

Name

GRACELY, WILLIAM H.

Name

Street Address (Do NOT Use P.O. Box Number)

474 FIFTH AVENUE SOUTH - P.O. BOX 1796

Street Address (Do NOT Use P.O. Box Number)

City, State and Zip Code

NAPLES, FLORIDA

33940

City, State and Zip Code

8. See signature restrictions under instructions on reverse side of this form.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute
This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On
This Report Shall Have the Same Legal Effects As If Made Under Oath.

Typed Name of Signing Officer

William H. Gracely

Title

Vice President

Telephone Number

(813) 262-6617

Date

4 January 1979

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

CORPORATION ANNUAL REPORT  1980 THIS REPORT MUST BE ACCOMPANIED BY A \$10 FEE	FLORIDA DEPARTMENT OF STATE George Firestone Secretary of State DIVISION OF CORPORATIONS	DO NOT WRITE IN THIS SPACE AND FILED MAR 12 10 13 PM 1980 FLORIDA DEPT. OF STATE CORPORATIONS DIVISION TALLAHASSEE, FLORIDA
---	---	---

READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES
PLEASE STAPLE CHECK TO ANNUAL REPORT

1. Name and Address of Corporation Principal Office: 700988 HUMANE SOCIETY OF COLLIER COUNTY, INC. MR. WILLIAM H. GRACELY 474 FIFTH AVENUE SOUTH, P.O. BOX 1796 NAPLES FLA 33940 If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.	2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient. Street Address C/O William H. Gracely 2408 Linwood Ave., Naples 33942 P.O. Box No. P. O. Box 1796 City Naples State Florida Zip Code 33939	
3. Date Incorporated or Qualified To Do Business in Florida 5/20/1960	4. Federal Employer Identification Number (FEIN) 59-1033966	5. Date of Last Report 1979

6. Name and Street Address of Each Officer and Director			
Name of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
~~THOMAS, GAY~~	~~R/D~~	~~2188 SHEPHERD DRIVE~~	~~NAPLES, FL~~
GRACELY, WILLIAM H.	V/D	474 FIFTH AVE. SOUTH	NAPLES, FL
DATES, EDWARD J, JR.	T/D	1010 FIFTH AVE. SOUTH	NAPLES, FL
BRIGGS, JAMES L.	S/D	643 18TH AVE SOUTH	NAPLES, FL
Maritz, Lloyd	P/D	1340 Spyglass Lane	Naples, Florida 33940
Anderson, Gene C.	V/D	11 Sabre Cay Lane	Naples, Florida 33940

7. Registered Agent Information Name GRACELY, WILLIAM H. Street Address (Do NOT Use P.O. Box Number) 2408 Linwood Ave. City, State and Zip Code NAPLES, FLORIDA 33939	To change the Registered Agent and/or Registered Office a separate statement signed by the new Registered Agent and executed by the President or Vice President of the corporation must be filed with a fee of \$3.
---	---

See signature restrictions under instructions on reverse side of this form.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As if Made Under Oath.

Typed Name of Signing Officer William H. Gracely	Title Vice President	Telephone Number (813) 775-4538
Signature 		Date 11 February 1980

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

**CORPORATION
ANNUAL REPORT**

FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

FILED

JUN 30 11 12 AM '81

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1981

THIS REPORT MUST BE ACCOMPANIED BY A \$10 FEE

READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES

PLEASE STAPLE CHECK TO ANNUAL REPORT

1. Name and Address of Corporation Principal Office:

700988
HUMANE SOCIETY OF COLLIER COUNTY, INC.
C/O WILLIAM H GRACEY
2408 LINWOOD AVE
NAPLES, FL 33942

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

2. Enter Check of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient

Street Address
Airport Rd.
P.O. Box No.
P. O. Box 451, Naples
City
Florida 33939
State Zip Code

3. Date Incorporated or Qualified To Do Business in Florida

5/20/1960

4. Federal Employer Identification Number (FEIN)

59-1033966

5. Date of Last Report

1980

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
Robert Michael	P/D	1005 Rose Way	NAPLES, FL 33942
OATES, EDWARD J, JR.	T/D	1010 FIFTH AVE. SOUTH	NAPLES, FL
BRIGGS, JAMES L.	S/D	643 18TH AVE SOUTH	NAPLES, FL
HARTZ, LLOYD	P/D	1340 SPYGLASS LANE	NAPLES, FL
Diane Eller	V/D	741 Hickory Rd.	NAPLES, FL 33940

7. Registered Agent Information

Name
Robert Michael
Street Address (Do NOT Use P.O. Box Number)
1005 Rose Way
City, State and Zip Code
NAPLES, FLORIDA 33942

To change the Registered Agent and/or Registered Office, a separate statement signed by the new Registered Agent and executed by the President or Vice President of the corporation must be filed with a fee of \$3.

See signature restrictions under instructions on reverse side of this form.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.

Typed Name of Signing Officer

Edward J. Oates, Jr.

Title

Treasurer, Bd. of Directors

Telephone Number

261-8811

Signature

Date

1/30/81

DO NOT WRITE IN THIS SPACE

Feature to file this



FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State

Telephone Number:
904/488-9840

STATEMENT OF CHANGE OF REGISTERED OFFICE
OR REGISTERED AGENT, OR BOTH

To the Secretary of State of the State of Florida.

Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

700988
3.00 DS

FIRST: The name of the corporation is Humane Society of Collier County, Inc.

SECOND: The address of its present registered office is c/o William H. Gracely
2408 Linwood Avenue, Naples, FL 33942

THIRD: The address to which its registered office is to be changed is c/o Robert Michael
1005 Rose Way, Naples, FL 33942

FOURTH: The name of its present registered agent is William H. Gracely

FIFTH: The name of its successor registered agent is Robert Michael

SIXTH: The address of its registered office and the address of the business office of its registered agent, as changed, will be identical.

SEVENTH: Such change was authorized by resolution duly adopted by its board of directors.

Dated 1/30/81, 1981

Humane Society of Collier County, Inc.

(exact corporate name)

SIGNATURE Diene Eiler
(President or Vice-President)

FILING FEE: \$3.00

DATE May 5, 1981

SIGNATURE [Signature]
(Registered Agent)

DATE May 5, 1981

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

CORPORATION
ANNUAL REPORT

1983



George Cristoforo
Secretary of State

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

FILED

JUN 30 11 50 AM '83

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

005 6725 6/30/83

005 6725 6/30/83

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of \$10 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office

70096A
HUMANE SOCIETY OF COLLIER COUNTY, INC.
370 AIRPORT RD N
N/A
NAPLES, FLORIDA 33942

A. Enter Change of Address of Corporation Principal Office (Not for Use if Not Sufficient)

Street Address

P.O. Box No.

City

005 6725 6/30/83

State

005 6725 6/30/83

2. Date Incorporation or Reincorporation To Do Business in Florida

05/20/1960

3. Federal Employer Identification Number (EIN)

59-1033766

4. Date of Last Report

04/08/1982

5. Names and Street Addresses of Each Officer and Director

Name of Officer and Director	City and State	0000
ELLER, DIANE	NAPLES, FL	0000
PHARIS, CHARLES R.	NAPLES, FL	0000
HUBSCHMAN, CONNIE	NAPLES, FL	0000
WICKS, JEAN	NAPLES, FL	0000
Terry Connor	Naples, FL	

Registered Agent Information

HUBSCHMAN, CONNIE

3451 TAMIAHI TRAIL E

Naples, FL

33942

Diane Eller

741 Hickory St.

Naples, FL 33940

SIGNATURE: *Diane Eller*

6-18-83

\$3.00 additional fee required for Registered Agent changes.

SIGNATURE: *Diane Eller*

6-18-83

Typed Name of Signing Officer

Diane Eller

President

597-4451

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

CORPORATION
ANNUAL REPORT

1982



George Firestone
Secretary of State

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

APPROVED

APR 3 3 27 PM 1982

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of \$10 Required — Make Checks Payable To: Secretary of State, FLORIDA

1. Name and Address of Corporation Principal Office: 700988 HUMANE SOCIETY OF COLLIER COUNTY, INC. ~~C/O WILLIAM H. CROSBY~~ AIRPORT ROAD/P.O. BOX 483 NAPLES FL 33939		2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient Street Address: 370 Airport Rd. N. P.O. Box No.: n/a City: Naples, State: Florida Zip Code: 33942	
---	--	---	--

3. Date Incorporated or Qualified To Do Business in Florida 05/20/1960	4. Federal Employer Identification Number (FEIN) 59-1033966	5. Date of Last Report 06/30/1981
--	---	---

6. Names and Street Addresses of Each Officer and Director			
Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
~~MICHAEL, ROBERT~~	~~P/D~~	~~1005 ROSE WAY~~	~~NAPLES, FL~~
~~GATES, EDWARD J, JR.~~	~~T/D~~	~~1010 FIFTH AVE. SOUTH~~	~~NAPLES, FL~~
~~BRIGGS, JAMES L.~~	~~S/D~~	~~643 18TH AVE SOUTH~~	~~NAPLES, FL~~
~~HARITZ, LLOYD~~	~~P/D~~	~~1340 SPYGLASS LANE~~	~~NAPLES, FL~~
~~ELLER, DIANE~~	~~V/D~~	~~741 HICKORY ROAD~~	~~NAPLES, FL~~
Connie Hubschman	P/D	3451 Tamiami Trail E.	Naples, FL
Charles R. Pharis	T/D	545 Whispering Pines Ct.	Naples, FL
Jean Hicks	S/D	625 Anchor Road Dr.	Naples, FL

Registered Agent Information	
7. Name and Address of Current Registered Agent MICHAEL, ROBERT 1005 ROSE WAY NAPLES, FLORIDA 33942	8. Name and Address of New Registered Agent Name: Connie Hubschman Street Address (Do NOT Use P.O. Box Number): 3451 Tamiami Trail E. City, State and Zip Code: Naples, FL 33942

9. Pursuant to the provisions of Sections 557.034 and 557.037, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, solemnly certifies that the information furnished in this report is true and correct and that the registered office or registered agent is both in the State of Florida.

Such change is authorized by resolution duly adopted by its board of directors on **January 27, 1982**

SIGNATURE *Connie Hubschman* DATE **Mar. 1, 1982**
(Registered Agent Accepting Appointment)

\$3.00 additional fee required for Registered Agent changes.

10. See signature restrictions under instructions on reverse side of this form.

I Certify that I am an Officer of the Corporation, its Receiver or Trustee Empowered to Execute This Report as Required by Chapter 557 F.S.

I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effect As if Made Under Oath.

Signature *Connie Hubschman* Date **Mar. 1, 1982**
Typed Name of Signing Officer: **Connie Hubschman** Title: **President, Bd. of Dir.** Telephone Number: **813-774-3434**

700988

FORRYTH & SCARBOROUGH, P.A.

ATTORNEYS AT LAW
600 FIFTH AVENUE SOUTH, SUITE 210
NAPLES, FLORIDA 33940-6668
(813) 263-6700

JOHN P. FORRYTH
JAMES R. SCARBOROUGH (RETIRED)

JOHN M. SWALM III
H. GREG LEE
JOHN N. BRUGGER

November 2, 1983

Corporate Records Bureau
Division of Corporations
Dept. of State
P.O. Box 6327
Tallahassee, Florida 32301

re: The Humane Society of Collier County, Inc.

Gentlemen:

Enclosed find original and copy of Amended and Restated Articles of Incorporation of The Humane Society of Collier County, Inc. along with our check in the sum of \$15.00.

Please file and return the copy marked with filing date. Thank you for your cooperation.

Very truly yours,

Wenke Brandes
(Mrs) Wenke Brandes,
Legal Assistant to John N. Brugger

Encl.

005 2626 11/08/83

005 2626 11/08/83

15.00 12
15.00 10

FILED
NOV 9 25 10 83
TALLAHASSEE, FLORIDA

Name Change

Wenke Brandes
11/2/83
TELL/54
TELL/11/19/83
TELL/11/19/83
TELL/11/19/83
TELL/11/19/83
TELL/11/19/83

C. TAX	
FILING	15.00
R. AGENT FEE	
C. COPY	
TOTAL	15.00
B. BANK	
BALANCE DUE	
REFUND	

AMENDED AND RESTATED ARTICLES OF INCORPORATION
OF
THE HUMANE SOCIETY OF COLLIER COUNTY, INC.

Pursuant to Section 617.0201 (4), Florida Statutes (1982), the Articles of Incorporation of THE HUMANE SOCIETY OF COLLIER COUNTY, INC., a Florida corporation not for profit, are hereby amended and restated in their entirety. The corporation was originally incorporated under the name of THE HUMANE SOCIETY OF NAPLES, INC. and its original Articles of Incorporation were filed on June 3, 1968. The Amended and Restated Articles of Incorporation of THE HUMANE SOCIETY OF COLLIER COUNTY, INC., shall henceforth be as follows:

ARTICLE I

NAME:

The name of this corporation shall be THE HUMANE SOCIETY OF COLLIER COUNTY, INC., and it shall be located in Collier County, Florida.

ARTICLE II

PURPOSE:

The purpose for which this Corporation is organized shall be to aid in the prevention of cruelty to animals, the relief of suffering among animals by providing care, both medical and physical and to provide for education of the general public to prevent cruelty to animals. This Organization may engage in any activities which directly or indirectly further these purposes.

ARTICLE III

MEMBERSHIP:

Membership in this Organization shall be open to the public with qualification and admission to be in a manner set forth in the By-laws.

ARTICLE IV

TERM:

The term of this Corporation shall be perpetual.

ARTICLE V

DIRECTORS AND OFFICERS:

A. The affairs of this Corporation shall be conducted by a Board of Directors composed of not less than six (6) nor more than fifteen (15) members who shall be selected in manner set forth in the By-laws.

B. The business of the Corporation shall be conducted by the officers designated in the By-laws. The officers shall be elected by the Board of Directors at its first meeting following

the annual meeting of the members of the Corporation and shall serve at the pleasure of the Board.

ARTICLE VI

AMENDMENTS:

These Articles of Incorporation and the By-laws of this Corporation may be amended in a manner set forth in the By-laws.

ARTICLE VII

INDEBTEDNESS:

The highest amount of indebtedness or liability to which this Corporation may subject itself shall be \$250,000.

ARTICLE VIII

DISSOLUTION:

Upon dissolution of the Corporation, and prior to the completion thereof, all liabilities and obligations of the Corporation shall be paid, satisfied and discharged and all the remaining assets, property and income owned or held exclusively by the Corporation shall be expended for or applied to the purposes of the Corporation, or one or more of such purposes, exclusively, by transferring and conveying such assets, property and income to one or more corporations or organizations engaged in the prevention of cruelty to animals which activities are substantially similar to those of this Corporation, (no part of the net earnings of which inures to the benefit of any private shareholder or individual, and no substantial part of the activities of which is carrying on propaganda, or otherwise attempting to influence legislation) in accordance with the laws governing not-for-profit corporations of the State of Florida, and no part of such remaining assets, property or income shall be distributed to members or to any other persons whatsoever.

CERTIFICATE

The undersigned, being the duly elected and acting President and Secretary of THE HUMANE SOCIETY OF COLLIER COUNTY, INC., hereby certify that the foregoing were duly proposed by a majority vote at a regular meeting of the Board of Directors called for the purpose and held on the 18th day of October, 1983. The undersigned certify that the foregoing were approved by a two-thirds (2/3) vote of the Board of Directors at the regular meeting of the Board of Directors held on the 18th day of October, 1983, in accordance with the requirements of the Articles of Incorporation for their amendment. The foregoing both amend and restate the amended Articles of Incorporation in their entirety.

Executed this 15 day of November, 1983.

THE HUMANE SOCIETY OF COLLIER COUNTY, INC.

By: Diane Eller
DIANE ELLER President

Attest: Jean J. Hicks
JEAN J. HICKS Secretary

(corporate seal)

STATE OF FLORIDA

COUNTY OF COLLIER

Subscribed to before me this 15 day of November, 1983, by Diane Eller and Jean J. Hicks, President and Secretary, respectively, of THE HUMANE SOCIETY OF COLLIER COUNTY, INC., a Florida corporation not for profit, on behalf of said corporation.

[Signature]
Notary Public

My commission expires:

NOTARY PUBLIC, STATE OF FLORIDA AT LARGE
MY COMMISSION EXPIRES AUG. 12, 1985
NOTED THROUGH MICROFILMING

DUE DATE ON OR AFTER JANUARY 1 DELINQUENT AFTER JULY 1 OF EACH YEAR

**CORPORATION
ANNUAL REPORT**

1984



FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

APPROVED
AND
FILED

JUL 9 8 57 AM 1984

Read Notice and Instructions on Other Side Before Making Entries: DEPT. OF STATE
Filing Fee of \$10 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office 700988 HUMANE SOCIETY OF COLLIER COUNTY, INC. (THE 370 AIRPORT RD N N/A NAPLES, FLORIDA 33942 If above address (re)incorrect in any way, enter the correct address in item 2; include Zip Code.	2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient Street Address P.O. Box No. City State Zip Code
--	---

3. Date Incorporated or Qualified To Do Business in Florida 05/20/1960	4. Federal Employer Identification Number (FEIN) 59-1033964	5. Date of Last Report 06/30/1983
--	---	---

6. Names and Street Addresses of Each Officer and Director, as of December 31, 1983				
Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT use Post Office Box Numbers)	City and State	
1. ELLER, DIANE	P	741 HICKORY ROAD	NAPLES, FL	0
2. ~~XXXXXXXXXXXX~~	~~XXH~~	~~XXXXXXXXXXXXXXXXXXXX~~	~~XXXXXXXXXX~~	0
3. DANCA, GARY	T/D	4145 WHITE BLVD.	NAPLES, FL	0
4. HICKS, JEAN	S/D	625 ANCHOR RODE DR	NAPLES, FL	0
Thomas, Gay	VP	2180 Sheepshead Dr.	Naples, FL 33942	

Registered Agent Information	
7. Name and Address of Current Registered Agent ELLER, DIANE 741 HICKORY ROAD NAPLES, FL 33940	8. Name and Address of New Registered Agent Name Street Address (Do NOT use P.O. Box Numbers) City, State and Zip Code

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits this statement for the purpose of changing its registered officer or registered agent, or both, in the state of Florida.

Such change was authorized by resolution duly adopted by its board of directors on **January 17, 1984**

SIGNATURE **Diane Eller** DATE _____
(Registered Agent Accepting Appointment)

\$3.00 additional fee required for Registered Agent changes.

10. See signature (with name under signature) on reverse side of this form.

I Certify That I am An Officer of the Corporation, the Register or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I understand My Signature On This Report Shall Have the Same Legal Effects As if Made Under Oath.

Signature: <i>Gary E. Danca</i>	Date: 6/5/84
Typed Name of Signing Officer: Gary Danca	Telephone Number: 774-3434
Title: Treasurer	

11. Should you desire a certificate of status check, the box below and include an additional \$5.00 with your payment.

☐ **CERTIFICATE OF STATUS DESIRED**
 \$5 Additional fee required for certificates

COR 630 (1-84)

PRINTOUT SENT pg 12-26

LETTER SENT

CUS SENT

REINSTATEMENT
FILED 12/16/95

INVOLUNTARILY
DISSOLVED 11/1/95

700988

REINSTATEMENT 15

CUS

REGISTERED AGENT

OVERPAYMENT

72 Privilege Tax

73 Annual Report

74 Annual Report

75 Annual Report

76 Annual Report

77 Annual Report

78 Annual Report

79 Annual Report

80 Annual Report

81 Annual Report

82 Annual Report

83 Annual Report

84 Annual Report

85 Annual Report 20

TOTAL 35

REFUND

006 0252 12/14/86

15.00

POB 6327 41
Jalla
32314
Tina Roberts

DEC 16 11 46 AM '95
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NAME AVAILABLE

REINSTATED BY JK 12/19

UPDATER EF 12/20/85

UPDATER VERIFYER JK 12/23

The Humane Society of Collier County, Inc.

90 DAY NOTICE OF INTENT TO DISSOLVE

0-23

CORPORATION
ANNUAL REPORT
1985FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

Read Notice and Instructions on Other Side Before Making Entries

Filing Fee of \$20 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office		2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is Not Sufficient	
700988 HUMANE SOCIETY OF COLLIER COUNTY, INC. (THE 370 AIRPORT RD. N N/A NAPLES, FLORIDA 33942		Street Address 21 006 0252 1/14/86 P.O. Box No. 22 006 0252 1/14/86 20.00 35.00 City and State 23 Zip Code 24	
If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.			

3. Date Incorporated or Qualified To Do Business in Florida	05/20/1960	4. Federal Employer Identification Number (FEIN)	9-1033966	5. Date of Last Report	07/09/1984
---	------------	--	-----------	------------------------	------------

6. Names and Street Addresses of Each Officer and Director, as of December 31, 1984			
Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City, State and Zip Code
ELLER, DIANE	P	741 HICKORY ROAD	NAPLES, FL 33999 0
THOMAS, GAY	P	4680 GOLDEN GATE PKWY	NAPLES, FL 33962 0000
THOMAS, GAY	V/P	2180 SHEEPSHEAD DR	NAPLES, FL 33962 0
GRASSINGER, G. WILLIAM	T/D	4145 WHITE BLVD.	NAPLES, FL 33962 0
HICKS, JEAN	S/D	625 ANCHOR RODE DR	NAPLES, FL 33940 0

Registered Agent Information

7. Name and Address of Current Registered Agent	8. Name and Address of New Registered Agent
HICKS, JEAN 625 ANCHOR ROAD DR. NAPLES, FL 33940	Name 81 Street Address (Do NOT Use P.O. Box Number) 82 City and State 83 Zip Code 84

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, organized under the laws of the State of Florida, 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 resolution duly adopted by its board of directors on 8/20/85.

I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE Jean Hicks DATE 8/20/85
(Registered Agent Accepting Appointment)

\$3.00 additional fee required for Registered Agent changes.

10. See signature restrictions under instructions on reverse side of this form.
I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.
I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As if Made Under Oath.
Officer signing must be listed in Block 61.

Signature	Date
Typed Name of Signing Officer	Telephone Number

11. Should you desire a certificate of status check the box

CERTIFICATE OF STATUS DESIRED ☒

\$5 additional fee required for a Certificate of Status

CR-600 (7/85)

DUE DATE ON OR AFTER JANUARY 1 DELINQUENT AFTER JULY 1 OF EACH YEAR

**CORPORATION
ANNUAL REPORT
1986**



FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

APPROVED
AND
FILED

1986 APR 15

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of \$20 Required - Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office:

700988
HUMANE SOCIETY OF COLLIER COUNTY, INC. (THE)
370 AIRPORT RD N
N/A
NAPLES, FLORIDA 33942

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

3. Date Incorporated or Qualified To Do Business in Florida 05/20/1960

4. Federal Employer Identification Number (FEIN) 59-1033966

5. Date of Last Report 12/16/1985

6. Names and Street Addresses of Each Officer and Director, as of December 31, 1985

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
THOMAS, GAY IRENE BAETZLAFF	P	4680 GOLDEN GATE PKWY. 601 STARBOARD DR	NAPLES, FL 0
THOMAS, GAY JAMES H. FRAZIER	V/P	2188 SHEEPSHEAD CR 17 Bluebell Ave #405	NAPLES, FL 00000 33963
GRISSINGER, G. WILLIAM	T/D	1240 BLUE POINT AVE #B11	NAPLES, FL 0
HIGGS, JEAN DIANE ELLER	S/D	825 ANCHOR ROBE BR 741 Hickory Road	NAPLES, FL 0

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

HICK, JEAN
625 ANCHOR ROAD DR.
NAPLES, FL 33940

8. Name and Address of New Registered Agent

Name 81

DIANE ELLER

Street Address (Do NOT Use P.O. Box Number) 82

741 Hickory Road

City and State 83

NAPLES, FLA

FL.

Zip Code 84

33963

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered officer or registered agent or both in the State of Florida. Such change was authorized by resolution duly adopted by its board of directors on _____.

I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE

(Registered Agent Accepting Appointment)

DATE 3-25-86

\$3.00 additional fee required for Registered Agent changes.

See signature restrictions under instructions on reverse side of this form.

10. I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As if Made Under Oath (Officer signing must be listed in Block 6)

Signature

Irene M. Bretz LaFF

Typed Name of Signing Officer

Irene M. Bretz LaFF President

Date

April 8, 1986

Telephone Number

813-774-3434

11. Should you desire a certificate of status check the box

CERTIFICATE OF STATUS DESIRED ☐

\$5 Additional Fee required for a Certificate of Status

CR/CSA (1986)

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 31, 1987 F.D.

CORPORATION

ANNUAL REPORT
1987



FLORIDA DEPARTMENT OF STATE
George Firestone,
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

FILED

1987 MAR 11 AM 10:43

RECEIVED
FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of \$25 Required - Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office

700988 9
HUMANE SOCIETY OF COLLIER COUNTY, INC. (THE)
370 AIRPORT RD N
N/A
NAPLES, FLORIDA 33942

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient

Street Address 21

P.O. Box No 22

City and State 23

Zip Code 24

If adding address to record in file, add, after the correct address in item 2, include Zip Code

3. Date Incorporated or Qualified
in the State of Florida 05/20/1960

4. Federal Employer
Identification Number (EIN) 59-1033966

5. Date of
Last Report 04/15/1986

6. Names and Street Addresses of Each Officer and Director as of December 31, 1986

Name of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
~~XXXXXXXXXXXX~~	R	~~XXXXXXXXXXXX~~	~~XXXXXX~~ 0
FRAZIER, JAMES H.	P	17 BLUEBILL AVE #405	NAPLES, FL 00000
Archer, Thomas	V/P	240 Spring Line Dr.	Naples, FL 0
GRISWOLD, G. WILLIAM	T/D	1240 BLUE POINT AVE #B11	NAPLES, FL 0
ELLER, DIANE	S/D	741 HICKORY RD.	NAPLES, FL 0

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

ELLER, DIANE
741 HICKORY ROAD
NAPLES, FL 33963

8. Name and Address of New Registered Agent

(Form 6)

Street Address 1 (Do NOT Use P.O. Box Number) 82

Apartment Address 2 (Do NOT Use P.O. Box Number) 83

City and State 84

FL.

Zip Code 85

I, the undersigned, of the State of Florida, do hereby certify that the above-named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of complying with the provisions of Chapter 607, F.S., relating to the registration of corporations in the State of Florida. Such action was authorized by resolution duly adopted by a majority of the board of directors of the corporation. I am familiar with and accept the obligations of Section 607.05, F.S.

SIGNATURE

(Registered Agent Accepting Appointment)

DATE

\$3.00 additional fee required for Registered Agent changes.

9. Signature restrictions under restrictions on reverse side of this form

I, the undersigned, Am an Officer of the Corporation, the Receiver or Trustee or empowered to execute this Report as required by Chapter 607, F.S. I declare under penalty of perjury that the information furnished in this Report is true and correct to the best of my knowledge and belief. My Signature On This Report Shall Have the Same Legal Effect As if Made Under Oath.

Signature
James H. Frazier

Date
2/3/87

James H. Frazier

President

Telephone Number

(813) 643-1555 / (813) 598-2845 Home

10. Submit your filing certificate of status check fee

CERTIFICATE OF STATUS DESIRED ☐

\$5 Additional Fee
required for a
Certificate of Status

CR-600A (1/86)

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1ST.

CORPORATION

ANNUAL REPORT
1988



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

01/25/88 12:06

Filing Fee of \$25 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office:

700985
HUMANE SOCIETY OF COLLIER COUNTY, INC. (THE)
370 AIRPORT RD. N
N/A
NAPLES, FLORIDA 33942

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient

Street Address 21

370 Airport Rd. N.

P.O. Box No. 22

P.O. Box 8725

City and State 23

Naples, Florida

Zip Code 24

33941

If above address is incorrect in any way enter the correct address in item 2. Include Zip Code.

3. Date Incorporated or Quashed To Do Business in Florida 05/20/1960

4. Federal Employer Identification Number (FEIN) 59-1033966

5. Date of Last Filing 03/11/1987

6. Names and Street Addresses of Each Officer and Director as of December 31, 1987

1. Names of Officers and Directors	2. Title	3. Street Address of Each Officer and Director (Do NOT Use P.O. Box Number)	4. City and State	5.
ARCHER, THOMAS	V.	240 SPRING LINE DR.	NAPLES, FL.	
FRATIER, JAMES H.	P.	17 BLUEBILL AVE #405	NAPLES, FL.	00000
GRISSINGER, G. WILLIAM	T/D	1240 BLUE POINT AVE #B1	NAPLES, FL.	0
ELLER, DIANE	S/D	741 HICKORY RD.	NAPLES, FL.	0
McGrath, James F.	P.	650 Banyon Circle	Naples, FL.	
Edwards, Fred J.	V.P.	5810-26th Ave. S.W.	Naples, FL.	
Dudkewic, Stanley	T/D	646 Parkview Lane	Naples, FL.	

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

ELLER, DIANE
741 HICKORY ROAD
NAPLES, FL 33963

Name 81

Street Address 1 (Do NOT Use P.O. Box Number) 82

Street Address 2 (Do NOT Use P.O. Box Number) 83

City and State 84

FL.

Zip Code 85

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above named corporation, incorporated under the laws of the State of Florida, 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 resolution duly adopted by its board of directors or...

I hereby accept the appointment of registered agent I am familiar with, and accept the obligations of Section 607.035 F.S.

SIGNATURE

(Registered Agent Accepting Appointment)

DATE

10. If a foreign corporation, date first transacted business in Florida

11. See signature requirements under instructions on reverse side of this form.

I Certify That I Am An Officer or Director of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effect As If Made Under Oath. (Officer or Director signing must be listed in Block 6)

Signature

Typed Name of Signing Officer or Director

Date

Telephone Number

12. Should you desire a certificate of status check the box.

CERTIFICATE OF STATUS DESIRED



CA-607 (1-80)

FILE NOW ANNUAL REPORT DELINQUENT AFTER JULY 1ST

CORPORATION
ANNUAL REPORT
1988



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

**APPROVED
AND
FILED**

105 MAR 16 AM 11:49

Filing Fee of \$35 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office:

ZIP + 4

700988 9
HUGANE SOCIETY OF COLLIER COUNTY, INC. (THE)
370 AIRPORT RD W
P.O. BOX 8725
NAPLES, FLORIDA 33941-8725

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

3. Date Incorporation or Qualified To Do Business in Florida **05/20/1960**

4. Federal Employer Identification Number (FEIN) **59-1033966**

5. Date of Last Report **03/25/1988**

6. Names and Street Addresses of Each Officer and Director, as of December 31, 1988

1	2	3	4	5
1	Names of Officers and Directors	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State	
P/D	MCCRATH, JAMES F. D	650 BANTON CIRCLE	NAPLES, FL.	
V/P/D	EDWARDS, FRED J. D	5810-28TH AVENUE, S.W.	NAPLES, FL	00000
~~T/D~~	~~DODRISIC, STANLEY~~	~~646 PARKVIEW LANE~~	~~NAPLES, FL~~	~~0~~
S/D	ELLER, DIANE D	741 HICKORY RD.	NAPLES, FL	0
T/D	MEERPOHL, ANTHONY J. D	645 POMPANO DRIVE	NAPLES, FL.	
D	STANLEY, JOHN D	4040 OLD TRAIL WAY	NAPLES, FL	33940

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

ELLER, DIANE
741 HICKORY ROAD
NAPLES, FL 33963

8. Name and Address of New Registered Agent

Name 81

Street Address 1 (Do NOT Use P.O. Box Number) 82

Street Address 2 (Do NOT Use P.O. Box Number) 83

City and State 84

FL.

Zip Code 85

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above named corporation, incorporated under the laws of the State of Florida, 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 resolution duly adopted by its board of directors on [] (Specify date of the action of the board of directors). I am familiar with, and accept the obligations of, Section 607.025 F.S.

SIGNATURE

(Registered Agent Accepting Appointment)

DATE

10. If a foreign corporation, has not transported to business in Florida

See signature restrictions under instructions on reverse side of this form.

I Certify That I Am An Officer or Director of the Corporation, the Secretary or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I Understand the Signatures on This Report Shall Have the Same Legal Effects As if Made Under Oath. (Official Seal, if any, must be used in Block 6)

Signature

James F. McGrath
President

Title

JAMES F. McGRATH

Date

3/7/89

Telephone Number

813-643-1880

11. Should you desire a certificate of status check the box

CERTIFICATE OF STATUS DESIRED ☐

FILE NOW! THIS ANNUAL REPORT WILL BE DELINQUENT AFTER JULY 1ST

PS 45 145

**CORPORATION
ANNUAL REPORT
1990**



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

1990 FEB 16 PM 2:24

DO NOT WRITE IN THIS SPACE

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of \$35 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office:

700988 9

ZIP + 4 PRESORT
THE HUMANE SOCIETY OF COLLIER COUNTY, INC.
370 AIRPORT RD N
P.O. BOX 8725
NAPLES, FLORIDA 33941-8725

2. If Address in Block 1 is incorrect in any way, enter the correct address below. P.O. Box number alone is NOT sufficient. The NAME of the corporation can be changed only by filing an amendment.

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code

3. Date Incorporated or Qualified To Do Business in Florida

05/20/1960

4. FEI Number

59-1033966

FEI Number Applied For
FEI Number Not Applicable

6. Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information)

1. Title	2. Names of Officers and Directors	3. Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	4. City and State	5.
P/D	MCCRATH, JAMES F.	650 BANYON CIRCLE	NAPLES, FL	
VP/D	PILCHER, PATRICIA	257 SEABREEZE AVE.	NAPLES, FL	
V/P/D	EDWARDS, FRED J.	5810-28TH AVENUE, S.W.	NAPLES, FL	00000
P/D				
T/D	MEERPOHL, ANTHONY J.	645 POMPANO DRIVE	NAPLES, FL	0
	MORTENSEN, FLORENCE	598 92ND AVENUE, N.	NAPLES, FL	
S/D	ELLER, DIANE	741 HICKORY RD.	NAPLES, FL	0
D	STANLEY, JOHN	4040 OLD TRAIL WAY	NAPLES, FL	

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

ELLER, DIANE
741 HICKORY ROAD
NAPLES, FL 33963

8. Name and Address of New Registered Agent

Name 81

Street Address 1 (Do NOT Use P.O. Box Number) 82

Street Address 2 (Do NOT Use P.O. Box Number) 83

City and State 84

FL

Zip Code 85

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statute, the above named corporation, incorporated under the laws of the State of Florida, 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 resolution duly adopted by its board of directors on _____

I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.035 F.S.

SIGNATURE

(Registered Agent Accepting Appointment)

DATE

10. I certify that the information included on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effects as a made under oath. I further certify that I am an officer or director of the corporation or the president or the chief executive officer of the corporation and that I am qualified to execute this report as required by Chapter 607, F.S.

SIGNATURE

Fred J. Edwards

President

DATE

2/7/90

Telephone Number

(813) 455-2112

11. Should you desire a certificate of status check the box

CERTIFICATE OF STATUS DESIRED

15. Attached Form
16. Attached Form
17. Attached Form

FILE NOW! CORPORATE STATUS WILL BE
DELINQUENT AFTER JULY 1ST.

CORPORATION
ANNUAL REPORT
1991



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

APR 30 1991

APPROVED
FL. DEPT. OF STATE
CORPORATIONS DIV.
TALLAHASSEE, FL.
FILED

FILING FEE OF \$61.25 REQUIRED

DO NOT WRITE IN THIS SPACE

1. Name and Mailing Address of Corporation: **DOCUMENT #700988 (9)**

THE HUMANE SOCIETY OF COLLIER COUNTY, INC.
370 AIRPORT RD N
P.O. BOX 8725
NAPLES, FLORIDA 33941-8725

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.

2. If Address in Block 1 is incorrect in any way, enter the correct address below. P.O. Box is acceptable. The NAME of the corporation can be changed only by filing an amendment.

21 Street Address

22 P.O. Box No.

23 City and State

24 Zip Code

3. Date Incorporated or Qualified
To Do Business in Florida
05/20/1960

4. FEI Number
59-1033966

FEI Number Applied For

FEI Number Not Applicable

5. **\$8.75** Additional Fee required
for a Certificate of Status

CERTIFICATE OF STATUS DESIRED ☐

6. Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information.)

1. Title	2. Names of Officers and Directors	3. Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	4. City and State
V/P/D	~~PILCHER, PATRICIA~~ BARRY, GERARD	~~257 SEABREEZE AVENUE~~ 211 1ST AVENUE, N.	~~NAPLES, FL.~~ NAPLES, FL.
P/D	EDWARDS, FRED J.	5810 28TH AVENUE, S.W.	NAPLES, FL 00000
T/D	~~MORTENSEN, FLORENCE~~ MORTENSEN, FLORENCE	~~598 92ND AVENUE, N.~~ 598 92ND AVENUE, N.	~~NAPLES, FL~~ NAPLES, FL 0
S/D	~~ELLER, DIANE~~ PILCHER, PATRICIA J.	~~741 HICKORY RD.~~ 257 SEABREEZE AVENUE	~~NAPLES, FL~~ NAPLES, FL 0
D	STANLEY, JOHN	4040 OLD TRAIL WAY	NAPLES, FL

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

ELLER, DIANE
741 HICKORY ROAD
NAPLES, FL 33963

8. Name and Address of New Registered Agent

81 Name

PILCHER, PATRICIA J.

82 Street Address 1 (Do NOT Use P.O. Box Number)

257 SEABREEZE AVENUE

83 Street Address 2 (Do NOT Use P.O. Box Number)

84 City

NAPLES,

FL.

85 Zip Code

33963

9. Pursuant to the provisions of Sections 607.02(2) and 607.15(8) Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, as both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as the agent and I am familiar with and accept the provisions of Section 607.02(2) Florida Statutes.

SIGNATURE

Patricia J. Pilcher
(Registered Agent Accepting Appointment)

DATE **4/23/91**

10. I 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 upon oath. I further certify that I am an officer or director of the corporation or a member or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 6 on an attachment with an affidavit.

SIGNATURE

Fred J. Edwards

DATE **4/17/91**

Typed Name of Signing Officer or Director

Fred J. Edwards

Title

President

Telephone Number Daytime

(813) 597-6116

FILING FEE OF \$61.25 REQUIRED

required
plus

**FILE NOW! CORPORATE STATUS WILL BE
DELINQUENT AFTER JULY 1ST.**

**CORPORATION
ANNUAL REPORT
1992**



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

AP-852

**APPROVED
SEC. OF STATE
CORPORATIONS DIV.
TALLAHASSEE, FLA.
FILED**

FILING FEE \$61.25 Make Payable To: Secretary of State

DO NOT WRITE IN THIS SPACE

1. Name and Mailing Address of Corporation: **DOCUMENT # 700988 (9)**

**THE HUMANE SOCIETY OF COLLIER COUNTY, INC.
370 AIRPORT RD N
P.O. BOX 8725
NAPLES FL 33942-3530**

2. If Address in Block 1 is incorrect, list the correct address and correct information and enter the information in Block 2. P.O. Box is acceptable. The name of the corporation is changed only by filing an amendment.

21. Mailing Address

22. P.O. Box No.

23. City and State

24. Zip Code

3. Date incorporated or Qualified
To Do Business in Florida

05/20/1960

If above address is incorrect in any way, line through the incorrect information and enter correct address in Block 2.

3a. Date of Last Report

04/30/1991

4. FEI Number

59-1033966

FEI Number Applied For

FEI Number Not Applicable

\$6.75

CERTIFICATE OF STATUS DESIRED

5. Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information.)

1. Title	2. Names of Officers and Directors	3. Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	4. City and State
1. V/P/D	BARRY, GERARD	211 1ST AVE N	NAPLES, FL.
2. P/D	EDWARDS, FRED J.	5810-28TH AVENUE, S.W.	NAPLES, FL 00000
3. T/D	MORTENSEN, FLORENCE	598 92ND AVENUE, N.	NAPLES, FL 0
4. S/D	PILGHER, PATRICIA J	257 SEABREEZE AVE	NAPLES, FL 0
5. D	STANLEY, JOHN	4040 OLD TRAIL WAY	NAPLES, FL
6.	See attached sheet		

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

**PILGHER, PATRICIA J
257 SEABREEZE AVE
NAPLES, FL 33963**

81. Name

DIANE ELLER

82. Street Address (Do NOT Use P.O. Box Numbers)

741 HICKORY ROAD

83. Street Address 2 (Do NOT Use P.O. Box Numbers)

84. City

NAPLES

FL.

85. Zip Code

33963

9. Pursuant to the provisions of Sections 607.0501 and 607.0502, Florida Statutes, the above named corporation certifies that the purpose of this report is to provide information to the Secretary of State of Florida. Such change was made by the corporation's officers and directors. I hereby accept the responsibility as registered agent. I am familiar with and accept the obligations of Section 607.0501, Florida Statutes.

SIGNATURE

Diane Eller

(Registered Agent Accepting Appointment)

DATE

4-3-92

10. This corporation has liability for the estate tax under 5. 194.012. Yes ☒ No ☐ (See other side for information on filing for 1.)

11. I certify that the information contained in this annual report is true and correct and that the corporation and its officers and directors have the knowledge and belief that the information is true and correct and that the corporation and its officers and directors have the knowledge and belief that the information is true and correct.

SIGNATURE

Fred Edwards

DATE

4-3-92

Print Name of Signing Officer or Director

FRED EDWARDS

PRESIDENT

Telephone Number (Daytime)

813 597-6116

12. Should you wish to contribute to the Election Campaign Financing Trust Fund, check the box and attach an additional \$5.00 to this filing fee.

Humane Society of Collier County, Inc.

~~P.O. Box 8725~~

370 Airport Road North
Naples, FL 33942

Naples, Florida 88941

(813) 643-1555

6. (continued)

<u>Title</u>	<u>NAME</u>	<u>ADDRESS</u>	<u>CITY AND STATE</u>
V/P/D	PILCHER, PATRICIA J.	257 SEABREEZE AVE	NAPLES, FL
S/D	ELLER, DIANE	741 HICKORY RD.	NAPLES, FL



*all Creatures Great and Small ...
... The Lord God made them all.*

File Now. Filing Fee after May 1 is \$225.00

CORPORATION
ANNUAL REPORT
1993



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED

1993 MAY -1 PM 2:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Name and Mailing Address of Corporation: **DOCUMENT # 700988 (9)**
THE HUMANE SOCIETY OF COLLIER COUNTY, INC.
370 AIRPORT RD S
NAPLES FL 33942-3530

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Quashed: **05/20/1960**
3a. Date of Last Report: **04/08/1992**
4. FEI Number: **591033966**
Approved For: ☐ Not Applicable

FILING FEE: **\$200.00**
ANNUAL REPORT \$61.25 + \$138.75 CORPORATION SUPPLEMENTAL FEE.
MAKE CHECK PAYABLE TO DEPARTMENT OF STATE

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

5. Certificate of Status Desired: ☒ **\$6.75**
6. Election Campaign Financing: ☐ **\$5.00 May Be Added to Fees**
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status: ☒ **\$138.75 Supplemental Fee Not Required**
8. This corporation has liability for intangible tax under S. 119.045, Florida Statutes: ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ELLER, DIANE
741 HICKORY ROAD
NAPLES FL 33963

81. Name:
82. Street Address (P.O. Box Number is Not Applicable):
83. City:
84. State: **FL**
85. Zip Code:
86. Country:

11. Pursuant to the provisions of Sections 607.0605 and 607.1506 or Sections 617.0505 and 617.1506, 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 607.0505, Florida Statutes.

SIGNATURE

DATE

(Printed Name of Agent)

12. OFFICERS AND DIRECTORS

1.1 TITLE: **V/P/D**
1.2 NAME: **PITCHEL, PATRICIA J.**
1.3 ADDRESS: **297 SEABREEZE AVENUE**
1.4 CITY, ST., ZIP: **NAPLES FL**
2.1 TITLE: **P/D**
2.2 NAME: **EDWARDS, FRED J.**
2.3 ADDRESS: **5810-28TH AVENUE, S.W.**
2.4 CITY, ST., ZIP: **NAPLES, FL 00000**
3.1 TITLE: **T/D**
3.2 NAME: **MORTENSEN, FLORENCE**
3.3 ADDRESS: **588 92ND AVENUE, N.**
3.4 CITY, ST., ZIP: **NAPLES, FL 0**
4.1 TITLE: **S/D**
4.2 NAME: **ELLER, DIANE**
4.3 ADDRESS: **741 HICKORY ROAD**
4.4 CITY, ST., ZIP: **NAPLES FL**
5.1 TITLE: **D**
5.2 NAME: **STANLEY, JOHN**
5.3 ADDRESS: **4040 OLD TRAIL WAY**
5.4 CITY, ST., ZIP: **NAPLES FL**
6.1 TITLE:
6.2 NAME:
6.3 ADDRESS:
6.4 CITY, ST., ZIP:

13. OFFICERS AND DIRECTORS CHANGES

1.1 TITLE: **V/P/D**
1.2 NAME: **Mr Thomas Haringer**
1.3 ADDRESS: **514 Parkwood Lane**
1.4 CITY, ST., ZIP: **Naples, Fla 33940**
2.1 TITLE:
2.2 NAME:
2.3 ADDRESS:
2.4 CITY, ST., ZIP:
3.1 TITLE:
3.2 NAME:
3.3 ADDRESS:
3.4 CITY, ST., ZIP:
4.1 TITLE:
4.2 NAME:
4.3 ADDRESS:
4.4 CITY, ST., ZIP:
5.1 TITLE:
5.2 NAME: **Mr Jack McCreel**
5.3 ADDRESS: **1755 Knights Alley**
5.4 CITY, ST., ZIP: **Naples Fla 33962**
6.1 TITLE:
6.2 NAME:
6.3 ADDRESS:
6.4 CITY, ST., ZIP:

14. I certify that the information submitted on this report is true and correct and that I am a resident of the State of Florida. I further certify that I am an officer or director of the corporation or that I am a resident of the State of Florida. I am authorized to execute this report on behalf of the Corporation. (Print Name and Address)

SIGNATURE

Print/Type Name of Signer: **THOMAS HADINGER**
Title: **VICE PRES.**

Print/Type Name of Signer: **VICE PRES.**

Print/Type Name of Signer: **(915) 645-1880**

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1994



FLORIDA DEPARTMENT OF STATE
Jeff Smith
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

04 FEB 23 PM 2:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

1. Corporation Name
THE MARINE SOCIETY OF COLLIER COUNTY, INC.

DOCUMENT #
700988 (9)

Mailing Address
370 AIRPORT RD N
NAPLES FL 33942

Principal Place of Business
370 AIRPORT RD N
NAPLES FL 33942 339 42

2. Mailing Address
370 Airport Rd. N.

2a. Principal Place of Business
370 Airport Rd. N.

2b. State, Dist. & City

2c. State, Dist. & City

2d. City & State
Naples, FL.

2e. City & State
Naples, FL.

2f. Zip

2g. Country

2h. Zip

2i. Country

3. Date incorporated or Qualified
05/20/1980

3a. Date of Last Report
05/01/1993

4. FEI Number
50-1033966

Applied For
Not Applicable

5. Certificate of Status Desired
S8.75

6. Election Campaign
Financing Trust
Fund Contribution ☐

7. Non-profit Exempt from \$138.75
Supplemental Fee ☒

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ELLEN DANE
741 HICKORY ROAD
NAPLES FL 33963

81. Name
Florence Mortensen

82. Street Address (P.O. Box Number if Not Applicable)
598 92nd Ave. N.

83.

84. City
Naples

85. State
FL

86. Zip Code
33963

11. Pursuant to the provisions of Section 199.032, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, as provided in the laws of Florida. Such change was authorized by the corporation's board of directors. I hereby attest this statement as registered agent and accept the obligations of Section 199.032 or 617.0563, Florida Statutes.

SIGNATURE:

DATE: 2/18/94

12. OFFICERS AND DIRECTORS

13. CHANGES TO OFFICERS AND DIRECTORS IN 12

12.1 NAME
HADRINGER THOMAS
12.2 STREET ADDRESS
514 PARKWOOD LANE
12.3 CITY, STATE, ZIP
NAPLES FL 33940

13.1 NAME
v/p/d
Hadringer Thomas
13.2 STREET ADDRESS
514 Parkwood Lane
13.3 CITY, STATE, ZIP
Naples, FL. 33940

12.4 NAME
P/D
EDWARDS, FREDRICK
12.5 STREET ADDRESS
5810 28TH AVENUE, S.W.
12.6 CITY, STATE, ZIP
NAPLES, FL 33999

13.4 NAME
P/D
Edwards Fredrick J.
13.5 STREET ADDRESS
5810 28th Ave. S.W.
13.6 CITY, STATE, ZIP
Naples, FL. 33999

12.7 NAME
T/D
MORTENSEN, FLORENCE
12.8 STREET ADDRESS
598 92ND AVENUE, N.
12.9 CITY, STATE, ZIP
NAPLES, FL 33963

13.7 NAME
T/D
Mortensen Florence
13.8 STREET ADDRESS
598 92nd Ave. N.
13.9 CITY, STATE, ZIP
Naples, FL. 33963

12.10 NAME
S/D
ELLEN DANE
12.11 STREET ADDRESS
741 HICKORY ROAD
12.12 CITY, STATE, ZIP
NAPLES FL 33963

13.10 NAME
S/D
Tobias Donna Lee
13.11 STREET ADDRESS
4461 Gulfshore Blvd. N.
13.12 CITY, STATE, ZIP
Naples, FL. 33940

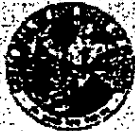
14. I, the undersigned, certify that the information furnished herein is true and correct to the best of my knowledge and belief, and that I am a director or officer of the corporation or the incorporator or the person who has been designated as the incorporator of the corporation. I further certify that the information furnished herein is true and correct to the best of my knowledge and belief, and that I am a director or officer of the corporation or the incorporator or the person who has been designated as the incorporator of the corporation. I further certify that the information furnished herein is true and correct to the best of my knowledge and belief, and that I am a director or officer of the corporation or the incorporator or the person who has been designated as the incorporator of the corporation.

SIGNATURE:
Florence Mortensen, Treasurer

2/18/94 113-591-981

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortenson
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 22 AM 9:04

DOCUMENT # 700988 (9)

1. Corporation Name

THE HUMANE SOCIETY OF COLLIER COUNTY, INC.

Principal Place of Business

Mailing Address

370 AIRPORT RD N
NAPLES FL 33942
US

370 AIRPORT RD N
NAPLES FL 33942
US

DO NOT WRITE IN THIS SPACE

3. Entity Previously Registered or Qualified

05/20/1960

3a. Date of Last Report

02/23/1994

4. FID Number

59-1033966

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Subd. Apt. #, etc.

26 Subd. Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

5. Certification of Status Desired

☒ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☒ \$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MORTENSEN, FLORENCE
588 92ND AVE. N.
NAPLES FL 33963

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Signature of, typed or printed name of registered agent and title (Block 12)

Signature of, typed or printed name of new registered agent (Block 10)

DATE

12. OFFICERS AND DIRECTORS

TITLE	VPD
NAME	HADINGER, THOMAS
STREET ADDRESS	514 PARKWOOD LANE
CITY-ST-ZIP	NAPLES FL
TITLE	PD
NAME	EDWARDS, FREDERICK J.
STREET ADDRESS	5810-28TH AVENUE, S.W.
CITY-ST-ZIP	NAPLES, FL 00000
TITLE	TD
NAME	MORTENSEN, FLORENCE
STREET ADDRESS	588 92ND AVENUE, N.
CITY-ST-ZIP	NAPLES, FL 0
TITLE	SD
NAME	TOBIAS, DONNA LEE
STREET ADDRESS	4461 GULFSHORE BLVD. N.
CITY-ST-ZIP	NAPLES FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	VPD	☒ Change ☐ Addition
12 NAME	MERCER, JACK	
13 STREET ADDRESS	1755 KNIGHTS WAY	
14 CITY-ST-ZIP	NAPLES, FL 33962	☒ Change ☐ Addition
21 TITLE	PD	
22 NAME	TOBIAS, LEE	
23 STREET ADDRESS	4451 Gulfshore Blvd. N	
24 CITY-ST-ZIP	NAPLES, FL 33940	☐ Change ☐ Addition
31 TITLE		
32 NAME		
33 STREET ADDRESS		
34 CITY-ST-ZIP		
41 TITLE	SD	☒ Change ☐ Addition
42 NAME	KATZ, TODD	
43 STREET ADDRESS	1170 29th AVENUE N	
44 CITY-ST-ZIP	NAPLES, FL 33940	☐ Change ☐ Addition
51 TITLE		
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		
61 TITLE		
62 NAME		
63 STREET ADDRESS		
64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and is true and correct as the information stated in Section 119.03(2)(a), 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 this corporation or the husband or wife of an officer or director of this corporation as required by Chapter 607, Florida Statutes and that my name appears in Block 12 or Block 13 if change of name or other information with an address.

SIGNATURE:

[Signature]
Sandra B. Mortenson, Secretary of State

3-17-95

(813) 643-1880