

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 704053

FILED
Feb 21, 2010
Secretary of State

Entity Name: COLLIER COUNTY JUNIOR DEPUTIES LEAGUE, INC.

Current Principal Place of Business:

COLLIER CO. SHERIFF'S OFFICE
3301 E. TAMiami TRAIL - BLDG. J
NAPLES, FL 34112

New Principal Place of Business:

Current Mailing Address:

PO BOX 1833
NAPLES, FL 34106

New Mailing Address:

FEI Number: 59-1638443

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FREEMAN, VICTORIA M
3301 E TAMiami TRAIL BLDG J
NAPLES, FL 34112 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD
Name: FREEMAN, VICTORIA
Address: 1469 ST CLAIR SHORE RD
City-St-Zip: NAPLES, FL 34104

Title: D
Name: JONES, PETRA
Address: 3301 EAST TAMiami TRAIL
City-St-Zip: NAPLES, FL 34112

Title: D
Name: LINDABURY, PAUL DIR
Address: 3301 EAST TAMiami TR
City-St-Zip: NAPLES, FL 34112

Title: VPD
Name: WOOD, JOHN R
Address: 3255 TAMiami TRAIL EAST
City-St-Zip: NAPLES, FL 34112

Title: PD
Name: ARNOLD, WAYNE
Address: 435 SPRINGLINE DR.
City-St-Zip: NAPLES, FL 34102

Title: D
Name: WILLIAM, POTEET
Address: C/O CCJDL, PO BOX 1833
City-St-Zip: NAPLES, FL 34106

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: VICTORIA M. FREEMAN

TD

02/21/2010

Electronic Signature of Signing Officer or Director

Date