

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 729406

FILED
Jan 27, 2009
Secretary of State

Entity Name: COLLIER COUNTY BAR ASSOCIATION, INC.

Current Principal Place of Business:

3301 E TAMIAMI TRAIL
BUILDING L
NAPLES, FL 34112

New Principal Place of Business:

Current Mailing Address:

3301 E TAMIAMI TRAIL
BUILDING L
NAPLES, FL 34112

New Mailing Address:

FEI Number: 59-1539262 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

LISA, MEAD A
3301 E TAMIAMI TRAIL
BUILDING L
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: PD () Delete
Name: KATHLEEN, PASSIDOMO
Address: 3301 E TAMIAMI TRAIL, BUILDING L
City-St-Zip: NAPLES, FL 34112

Title: VPD () Delete
Name: JANEICE, MARTIN
Address: 3301 E TAMIAMI TRAIL, BUILDING L
City-St-Zip: NAPLES, FL 34112

Title: TD () Delete
Name: PIETER, VAN DIEN
Address: 3301 E TAMIAMI TRAIL, BUILDING L
City-St-Zip: NAPLES, FL 34112

Title: SD () Delete
Name: JON, SCUDERI
Address: 3301 E TAMIAMI TRAIL, BUILDING L
City-St-Zip: NAPLES, FL 34112

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MARTIN, JANEICE T
Address: 3301 E TAMIAMI TRAIL, BUILDING L
City-St-Zip: NAPLES, FL 34112

Title: VPD (X) Change () Addition
Name: VAN DIEN, PIETER
Address: 3301 E TAMIAMI TRAIL, BUILDING L
City-St-Zip: NAPLES, FL 34112

Title: TD (X) Change () Addition
Name: SCUDERI, JON
Address: 3301 E TAMIAMI TRAIL, BUILDING L
City-St-Zip: NAPLES, FL 34112

Title: SD (X) Change () Addition
Name: MCMORROW, MARGARET
Address: 3301 E TAMIAMI TRAIL, BUILDING L
City-St-Zip: NAPLES, FL 34112

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: LISA A. MEAD

EXD

01/27/2009

Electronic Signature of Signing Officer or Director

Date