

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 729406

FILED
Jan 21, 2011
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:

3315 E TAMiami TRAIL
SUITE 505
NAPLES, FL 34112

Current Mailing Address:

3301 E TAMiami TRAIL
BUILDING L
NAPLES, FL 34112

New Mailing Address:

3315 E TAMiami TRAIL
SUITE 505
NAPLES, FL 34112

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:

LISA, MEAD A
3315 E TAMiami TRAIL
SUITE 505
NAPLES, FL 34112 US

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

SIGNATURE: LISA A. MEAD

01/21/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: SCUDERI, JON
Address: 3315 E TAMiami TRAIL, SUITE 505
City-St-Zip: NAPLES, FL 34112

Title: VPD
Name: MCMORROW, MARGARET
Address: 3315 E TAMiami TRAIL, SUITE 505
City-St-Zip: NAPLES, FL 34112

Title: TD
Name: SEEWALD, JEANNE
Address: 3315 E TAMiami TRAIL, SUITE 505
City-St-Zip: NAPLES, FL 34112

Title: SD
Name: NICOLA, TAMARA
Address: 3315 E TAMiami TRAIL, SUITE 505
City-St-Zip: NAPLES, FL 34112

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: LISA A. MEAD

ED

01/21/2011

Electronic Signature of Signing Officer or Director

Date