NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 736543

1. Corporation Name

ECONOMIC DEVELOPMENT COUNCIL OF COLLIER COUNTY, INC.

Principal Place of Business

3050 N HORSESHOE #120

Mailing Address

3050 N HORSESHOE DR #120

FILED Mar 04, 1999 8:00 am § Secretary of State

03-04-1999 90212 044 ****61.25

|--|--|--|

NAPLES FL 34				NAPLES I US	FL 34104									
- -1	ace of Business	;	2	٦.	ng Address				3. Date Inc	,	or Qualifed			
Suite, Apt.	#, etc.			Suite,	, Apt. #, etc.				4. FEI Nur	nber			h	plied For
22			27						29-10	9 <u>56</u> 79			\$8.75 A	Applicable
City & State	9		28	¬ ´	& State				5. Certifca	te of Status	Desired		Fee Re	
Zip		Country		Zip		Count	ry		6. Election		-	, _□	\$5.00 Added t	
24	25	1.4.1.1	29			30				and Contrib		Registered	· ···	0 1662
	9. Name and	d Address of	Current Reg	jisterea .	Agent	8	11 Name			0 -		registered	- Name	
							144	°Sus	san	<u>tare</u>	1915	>		
PAREIGIS,						8	Stree	et Address	(P.O. Box	Number is	Not Accep	otable)	ive_	
8200 BAIL						5	13	_ <i>30</i> S		7101	763/10	<u> </u>	<i>.</i>	
SUITE 162	_					Ľ	~	#	120					
MAPLES F							34 City	No	ples			FL	85 Zip 9	404 I
office or n	edistered agent	or both in th	e State of Fig	inda. Suc	08, Florida Statute ch change was au on 617.0503, Flori	tnonzea t	ov the cor	d corpora rporation's	tion submits board of d	s this state irectors. I h	ment for the ereby acco	e purpose of ept the appoi	changing its intment as re	registered gistered
SIGNATURE					****	0			nen reinstating)			DATE		
12.	Signature, typed or pr		ERS AND DI			13.	gent signatui	e required wi		NS/CHANG	SES TO O		D DIRECTO	RS IN 12
TITLE	D .		LING AND DI	120101	DELETE	1.1 TITL	 E	7	2000	Eric	KIN I	hairm	Change	☐ Addition
NAME	PASSIDOMO	IOUN				1.2 NAM	•		Ant F	Linkin	Roads	CAU Altro	Crow	N
STREET ADDRESS					•		- EET ADORES	s 55	SIRO	lar wa	X D	ive	W - C/O/-	•
	821 5TH AVE NAPLES FL	- 3				1	-ST-ZIP	Nio	iples,	ri.	34105	ኢ		
CITY-ST-ZIP TITLE	ED ED				☐ DELETE	2.1 TITL			rim		SEE PO	esident	Change	Addition
NAME	I 	HOAN			—	2.2 NAM		No	Hanst			ESIMOTI		, •
	PAREIGIS, S	UDAN 120	2050	N. F	brseshoe.		EET ADDRES	1 Tal	FIFH	ALVE	·S.			1
STREET ADDRESS		-L-WIE 102	Naples	CI. =	SUI/XO		Y-ST-ZIP	~ /14	aoles	a:	34	10.2		·
CITY-ST-ZIP TITLE	NAPLES FL		Joupies	<u>. 1 1, -</u>	S OELETE	3.1 T/TL		14	up (C)	<u> </u>	<u></u>	:- 	Change	Addition
	D	AIDIZIN)			/	3.2 NAM								ŀ
NAME	JEFFREY FR		000N EEE4	OIDOD	WAAD DD		EET ADORES							1
STREET ADDRESS	GRANT FRID		10011 0001	HIDGE	WOOD DR		r-st-zip	~						Į.
CITY-ST-ZIP	NAPLES FL				☐ DELETE	4.1 TITL			-				☐ Change	☐ Addition
TITLE NAME	RICHARD BO				_	4. 2 NAM								
STREET ADDRESS	1ST UNION		< 5801 PFI	ICAN R	AV RIV		EET ADDRES	ssi				٠,		1
CITY-ST-ZIP	NAPLES FL		\		A, DEV	4.4 CITY	-ST-ZIP							
TITLE	NO LLOIL	57100			☐ DELETE	5.1 TITL		1					☐ Change	☐ Addition
NAME						5.2 NAM	Έ	1						ţ
STREET ADDRESS						5.3 STR	EET ADDRES	ss						}
CITY-ST-ZIP						5.4 CITY	ST-ZIP].						
TITLE				······································	☐ DELETE	6.1 TITL	E						Change	Addition
NAME						6.2 NAW	E							
STREET ADDRESS						6.3 STR	EET ADDRES	38						f
CITY-ST-ZIP						6.4 C/TY	-ST-ZIP							

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 the corporation or the repetiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address, with all other like empowered.

SIGNATURE: