

FILED
Mar 21, 2008 8:00 am
Secretary of State

03-21-2008 90023 033 ****61.25

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # 736543 1. Entity Name ECONOMIC DEVELOPMENT COUNCIL OF COLLIER COUNTY, INC.					
Principal Place of Business 3050 N HORSESHOE #120 NAPLES, FL 34104 US			Mailing Address 3050 N HORSESHOE DR #120 NAPLES, FL 34104 US		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State Zip Country		City & State Zip Country		4. FEI Number 59-1695679 Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required					
6. Name and Address of Current Registered Agent NEMECEK, TAMMIE 3050 N. HORSESHOE DR. STE. 120 NAPLES, FL 34104			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when resigning)					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C GRANT, RICHARD 5551 RIDGEWOOD DRIVE NAPLES, FL 34108	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP PARRY, TIM 5811 PELICAN BAY BLVD, STE 500 NAPLES, FL	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P NEMECEK, TAMMIE 3050 N. HORSESHOE DR. #120 NAPLES, FL 34104	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GIRARDIN, CARL 4099 TAMiami TRAIL, STE 200 NAPLES, FL 34109	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CE SCHMELZLE, JULIE 4501 TAMiami TRAIL N., STE. 400 NAPLES, FL 34103	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	CHAIRMAN SCHMELZLE, JULIE AS SHOWN	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V DIAZ, CARLOS 3705 WESTVIEW DRIVE NAPLES, FL 34104	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	CHAIRMAN Elect DIAZ, CARLOS AS SHOWN	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HART, DAVID 24301 WALDEN CENTER DRIVE BONITA SPRINGS, FL 34134	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP McMAHAN, TERRY 2655 Northbrook DRIVE NAPLES, FL 34109	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V WARREN, JAMES 350 7TH STREET NORTH NAPLES, FL 34102	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GOGHEN, BRIAN 2600 Golden Gate Pkwy, Ste 200 NAPLES, FL 34105	☐ Change ☒ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: Date: <u>2/1/08</u> Daytime Phone #					