2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#742823

Entity Name: COLLIER COUNTY, 4-H CLUB FOUNDATION, INC.

FILED Apr 14, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

14700 IMMOKALEE RD NAPLES, FL 34120 US

Current Mailing Address: New Mailing Address:

PO BOX 110515 PO BOX 7581

NAPLES, FL 34106 US NAPLES, FL 34101 US

FEI Number: 59-1882892 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DENNING, LINDA V. ERICKSON, WILLIAM C 14700 IMMOKALEE ROAD P O BOX 7581

NAPLES, FL 34120 US NAPLES, FL 34101 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: WILLIAM C ERICKSON 04/14/2004

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: D () Delete Title: PD (X) Change () Addition

 Name:
 CALDWELL, WILLIAM,
 Name:
 BRISCOE, GARY

 Address:
 1248 MORNINGSIDE DRIVE
 Address:
 1320 N 15TH ST

City-St-Zip: NAPLES, FL City-St-Zip: IMMOKALEE, FL 341422989 US

Title: VPD () Delete Title: VPD (X) Change () Addition

 Name:
 SAM COLDING,
 Name:
 SAM COLDING,

 Address:
 659 10TH ST., N.
 Address:
 659 10TH ST., N.

City-St-Zip: NAPLES, FL 341028128 US

Title: PD () Delete Title: T (X) Change () Addition
Name: KELLER, JUDY Name: ERICKSON, WILLIAM C

 Address:
 406 GOLFVIEW DRIVE
 Address:
 136 PEBBLE BEACH CIR

 City-St-Zip:
 NAPLES, FL 34110
 City-St-Zip:
 NAPLES, FL 341137657 US

Title: SD () Delete Title: SD (X) Change () Addition

Name: PISTOR, JOHN Name: PISTOR, JOHN
Address: 221 POLYNESIA COURT Address: 221 POLYNESIA COURT

City-St-Zip: MARCO ISLAND, FL 341453825 US

Title: M () Delete Title: D (X) Change () Addition

Name: DENNING, LINDA, Name: CROWLEY, SHEILAH
Address: 14700 IMMOKALEE ROAD Address: 2743 BUCKTHORNWAY

City-St-Zip: NAPLES, FL 34105 US

Title: TD (X) Delete Title: () Change () Addition

 Name:
 ASHLEY, N. REX
 Name:

 Address:
 1044 CASTELLO DRIVE #106
 Address:

 City-St-Zip:
 NAPLES, FL
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: WILLIAM C ERICKSON TREA 04/14/2004

Electronic Signature of Signing Officer or Director

Date