FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT **1996**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **747212** **(9)**

1. Corporation Name

COLLIER COUNTY VETERANS COUNCIL, INC.

Principal Place of Business	Mailing Address
C/O KENDAL YOUNG 4425--18TH PLACE SW NAPLES FL 33999-5919 US	C/O KENDAL YOUNG 4425-18TH PLACE SW NAPLES FL 33999-5919 US

3. Date Incorporated or Qualified: 05/17/1979
3a. Date of Last Report: 02/13/1995

2. Principal Place of Business
21
Suite, Apt. #, etc. 22: SAME
City & State 23:
Zip 24:
Country 25: COLLIER

2a. Mailing Address
26
Suite, Apt. #, etc. 27: SAME
City & State 28:
Zip 29:
Country 30: COLLIER

4. FEI Number: 59-2153999 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. **Name and Address of Current Registered Agent**

TRUELOVE, RAY
2984-55TH TERRACE SW
NAPLES FL 33999

10. **Name and Address of New Registered Agent**

81 Name: DENISE J RAMIER
82 Street Address (P.O. Box Number is Not Acceptable): 2611 CITRUS LAKE DRIVE #206
83
84 City: NAPLES, FLORIDA FL 85 Zip Code: 33942

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: Denise J Ramier (Signature of new Registered Agent required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1.		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	C TRUELOVE, RAY 2984-55TH TERRACE AVE NAPLES FL	☐ DELETE	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	CHAIRMAN DENISE J. RAMIER 2611 CITRUS LAKE DRIVE #206 NAPLES, FLORIDA 33942	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VCD FLATHERS, JAMES O 4372-27TH CT SW #103 NAPLES FL	☐ DELETE	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP	VCD ROBERT NOBLE 1100 - 9TH STREET SOUTH #101C NAPLES, FLORIDA 33940	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD YOUNG, KENDAL W 4425 18TH PL SW NAPLES FL 19	☐ DELETE	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP	NO CHANGE	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD RAMIER, DENISE J 2611 CITRUS LAKE DR #206 NAPLES FL	☐ DELETE	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP	SD CHARLES HUDSON 65 KUMQUAT LANE NAPLE, FLORIDA 33961	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SOA KELLER, PATRICK 699-400TH AVE N NAPLES FL	☐ DELETE	51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP	NO CHANGE	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 receiver 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.

SIGNATURE: Kendal Young-Treasurer 1-17-96 941-455-2261

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #