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NONPROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **747212**

1. Corporation Name
COLLIER COUNTY VETERANS COUNCIL, INC.

Principal Place of Business	Mailing Address
COLLIER CO KENDAL YOUNG NAPLES FL 34116-5919 US	4425-18TH PL SW KENDALL YOUNG NAPLES FL 34116-5919 US

2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualifed 05/17/1979
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 59-2153999 ☐ Applied For ☐ Not Applicable
City & State 23	City & State 28	5. Certifcate of Status Desired ☐ **$8.75** Additional Fee Required
Zip 24 Country 25	Zip 29 Country 30	6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

9. Name and Address of Current Registered Agent

YOUNG, KENDALL
4425-18TH PL SW
34112
NAPLES FL 34116

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City **FL** 85 Zip Code

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 KENDAL YOUNG Kendal Young 1-21-99
Signature, typed or printed name of registered agent and title if applicable. (NOTE. Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	TP	☒ DELETE	1.1 TITLE	TP	☒ Change ☐ Addition
NAME	SHERMAN, DICK		1.2 NAME	RONALD L SCOTT	
STREET ADDRESS	11510 MALLARD CT		1.3 STREET ADDRESS	742-92TH AVE N	
CITY-ST-ZIP	NAPLES FL 34119		1.4 CITY-ST-ZIP	NAPLES, FLORIDA 34108	
TITLE	VPT	☒ DELETE	2.1 TITLE	VPT	☒ Change ☐ Addition
NAME	BEARDSLEY, KEVIN		2.2 NAME	BERNARD L WEISS	
STREET ADDRESS	2070 ROOKERY BAY DR		2.3 STREET ADDRESS	13455 POND APPLE DR. E.	
CITY-ST-ZIP	NAPLES FL 34114		2.4 CITY-ST-ZIP	NAPLES, FLORIDA 34119-8581	
TITLE	VPT	☒ DELETE	3.1 TITLE	VPT	☒ Change ☐ Addition
NAME	DAUDILL, GENE		3.2 NAME	JULIUS FUTO SR	
STREET ADDRESS	6238 SHADOWWOOD CR		3.3 STREET ADDRESS	1025 TRAIL TERRACE DR	
CITY-ST-ZIP	NAPLES FL 34112		3.4 CITY-ST-ZIP	NAPLES, FLORIDA 34103	
TITLE	SDT	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	SMITH, DAIVD		4.2 NAME		
STREET ADDRESS	5460-32ND AVE SW		4.3 STREET ADDRESS		
CITY-ST-ZIP	NAPLES FL 34116		4.4 CITY-ST-ZIP		
TITLE	TD	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	YOUNG, KENDAL		5.2 NAME		
STREET ADDRESS	4425-18TH PL SW		5.3 STREET ADDRESS		
CITY-ST-ZIP	NAPLES FL 34116		5.4 CITY-ST-ZIP		
TITLE	SOA	☒ DELETE	6.1 TITLE	SOA	☒ Change ☐ Addition
NAME	KRELLER, PATRICK J		6.2 NAME	NEIL PRITCHARD	
STREET ADDRESS	699-100TH AVE NORTH		6.3 STREET ADDRESS	4838 DEVON CIRCLE	
CITY-ST-ZIP	NAPLES FL 34108		6.4 CITY-ST-ZIP	NAPLES, FLORIDA 34112	

CR2E037 (11/98)

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 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, with all other like empowered.

SIGNATURE: KENDAL YOUNG Kendal Young Treasure 1-21-99 941-455-2261
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #