

FILE NOW: FILING FEE IS \$61.25

FILED

Mar 16 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **760436** (6)  
1. Corporation Name  
**COLLIER CULTURAL AND EDUCATIONAL CENTER, INC.**



Principal Place of Business <b>C/O W JAMES SMITH 458 8TH ST S NAPLES FL 33940</b>		Mailing Address <b>C/O W JAMES SMITH 458 8TH ST S NAPLES FL 33940</b>		3. Date Incorporated or Qualified <b>10/15/1981</b>	
				4. FEI Number <b>59-2359727</b>	
				Applied For Not Applicable	
2. Principal Place of Business <b>21 c/o W. J. Smith Suite, Apt. #, etc. 22 791 Fifth Ave. S. City &amp; State 23 Naples, FL Zip 24 34102</b>		2a. Mailing Address <b>25 c/o W. J. Smith Suite, Apt. #, etc. 27 791 Fifth Ave. S. City &amp; State 28 Naples, FL Zip 29 34102</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b> 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b> 7. Is this nonprofit corporation a homeowners association? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent <b>SMITH, W JAMES -458 8TH ST S-- -NAPLES FL 33940-</b>		10. Name and Address of New Registered Agent <b>81 Name 82 Street Address (P.O. Box Number Is Not Acceptable) 83 84 City 85 Zip Code</b>			

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>CTD SMITH, W. JAMES -458 8TH ST S-- -NAPLES FL 34101-8808---</b>	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <b>791 Fifth Ave. S. Naples, FL 34102</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D JIM MARTIN 975 SIXTH AVENUE S. NAPLES FL 34102</b>	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VCSD PFAFF, DAVID N. 696 16TH AVE S NAPLES FL 34102</b>	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D TOM BROWN 2660 AIRPORT ROAD S. NAPLES FL 34112</b>	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D DEBBIE DOSEN 4033 BELAIR LANE NAPLES FL 34103</b>	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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.

SIGNATURE: **W. James Smith** Chairman 3/10/98 941/262-7215

CR2E037 (10/97)