

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
May 12 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # K31188  
1. Corporation Name  
COLLIER COUNTY HOUSING, INC.

(1)



Principal Place of Business

Mailing Address

2121 CR 951  
SUITE 103  
NAPLES FL 33999  
US

2121 CR 951  
SUITE 103  
NAPLES FL 33999  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/12/1988

4. FEI Number

65-0068413

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☒ Yes

☐ No

2. Principal Place of Business

21 1810 SFC BLVD

Suite, Apt. #, etc.

22 UNIT 10

City & State

23 NAPLES FL

Zip

24 34109

Country

25 COLLIER

2a. Mailing Address

26 1810 SFC BLVD

Suite, Apt. #, etc.

27 UNIT 10

City & State

28 NAPLES FL

Zip

29 34109

Country

30 COLLIER

9. Name and Address of Current Registered Agent

DAMICO, DARRYL J.  
2121 CR 951  
SUITE 103  
NAPLES FL 33999

10. Name and Address of New Registered Agent

81 Name

DAMICO, DARRYL J.

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

1810 SFC BLVD

83

UNIT 10

84 City

NAPLES

FL

85 Zip Code

34109

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

*[Signature]*

(NOTE: Registered Agent signature required when reinstating)

DATE

4-28-98

12. OFFICERS AND DIRECTORS

TITLE DP  
NAME DAMICO, DARRYL J.  
STREET ADDRESS 2121 CR 951, SUITE 103  
CITY-ST-ZIP NAPLES FL

☐ DELETE

TITLE DS  
NAME DAMICO, BRADLEY T.  
STREET ADDRESS 2121 C.R. 951, SUITE 103  
CITY-ST-ZIP NAPLES FL

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DP  
1.2 NAME DAMICO, DARRYL J.  
1.3 STREET ADDRESS 1810 SFC BLVD UNIT 10  
1.4 CITY-ST-ZIP NAPLES FL 34109

☒ Change ☐ Addition

2.1 TITLE DS  
2.2 NAME DAMICO, BRADLEY T.  
2.3 STREET ADDRESS 1810 SFC BLVD UNIT 10  
2.4 CITY-ST-ZIP NAPLES FL 34109

☒ Change ☐ Addition

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

☐ Change ☐ 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 607, Florida Statutes; and that my name appears in  
Block 12 or Block 13 if changed, or on an attachment without address.

SIGNATURE

*[Signature]*

4-18-98

CR2E034 (10/97)