## 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## FILED May 05, 2003 8:00 am Secretary of State 04-07-2003 90207 012 \*\*\*\*70.00

1. Entity Nan	MENT # NO2000(  TIONAL COLLEGE FOUNDATION		9					04-07-2003	90207 012 ***	70.00	
Principal Place 2655 NORTHBI NAPLES FL 34	Mailing Address 2655 NORTHBROOKE DR NAPLES FL 34(19			- -							
2. Principal F	Place of Business	3. Mailing	i Addraes						11))		
Suite, Apt. #, etc.			Apt. #, etc.					Bil9 trace Back adiff	184(1) 83(14 B3)(4 B4) B4) 131(E	1 P( <b>0</b> 4 <b>0</b> 1 1 1 1 4 4 0 1	
			<u> </u>				CHECK HERE IF MAKING CHANGES				
City & State		City &	siate i				4. FEI Number 65-1176	465		Applied For Not Applicable	<u>.</u>
Zip	Country	Zip		Cou	ntry		5. Certificate of S	tatus Desired	\$8.75 / Fee Requ		
	6. Name and Address of Current R	legistered A	ent -	`	Name		7. Name and Add	tress of New R	gistered Agent –		7
	N, TERRY P			~ ~		Idress (I	P.O. Box Number is	Not Acceptable	<del></del>		
2655 NORTHBROOKE DR NAPLES FL 34119		!									4
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			•		City			<del></del> _	FL Zip Ci	ode	-
8. The above	named entity submits this statement for	the purpose o	of changing its	registere	d office or	register	ed agent, or both, in	the State of Flor		h, and accept	-
the obligat	lons of gistered agent.										
SIGNATURE	Signet use typed or printed fame of registered agent an	ul side if paralleable			P. McM		when reinstating)		4/3/03 DATE		
	ordered, Abert or braned fame or redistrates about au	d and a abbacace	(NOII)	C negrated	Mari somm	e rechiled	Austri Maneracidi				4
				Election Campaign Financing frust Fund Contribution.			\$5.00 May Be Added to Fees		te Check Payable a Department of		
10.	OFFICERS AND DIRE			11.		A	DDITIONS/CHANG	ES TO OFFICER	S AND DIRECTORS		]ॢ
TITLE NAME	Terry P. McMahan	ì	□ Delete 	TITLE NAME	}	_			☐ Change		18
STREET ADDRESS CITY-ST-ZIP	2655 Northbrooke Dri Naples, FL 34119	ive	T		T ADORESS ST-ZIP	T	-				CR2E037 (10/02)
TITLE	Secretary		Deleta	TITLE					☐ Change	Addition	
NAME STREET ADDRESS	Jeanette Brock 2655 Northbrooke Dri	ive .	T		T ADDRESS	ľ	•				
TITLE	Naples, FL 34119 Treasurer	<u> </u>	Delete	TITLE	ST-ZIP		<del></del>		Change	Addition	1
NAME	- John-W. White-			NAME			<u> </u>		****		1
STREET ADDRESS CITY-ST-ZIP	2655 Northbrooke Dri	lve	T	1	T ADDRESS ST-ZIP	T	•				}
MILE	Naples, FL 34119	į	Oelete	TITLE					☐ Change	Addition	1
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STREET ADDRESS CITY-ST-ZIP			-		ADDRESS						
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NAME [		i		NAME					- vienge		
STREET ADDRESS CITY-ST-ZIP		ì		STREE City-S	T ADDRESS ST-ZIP						
12. I hereby coindicated of the corp changed.	ertify that the information supplied with the on this report or supplemental report is troporation or the receiver or trustee empower on an attachment with an address, with an address, with the control of the control	is filing does ue and accur ered to exect th all other like	not qualify for ate and that m the this report a empowered.	the exeminations the exemination of the exemination	ption state ire shall haved by Chap	in Sec the siter 617,	tion 119.07(3)(i), Flo ame legal effect as i Florida Statutes; an	rida Statutes. I f f made under or d that my name	urther certify that the ath; that I am an office appears in Block 10	information or or otrector or Block 11 if	1

4/3/03

239-513-1122