

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009850

**FILED**  
**Feb 17, 2009**  
**Secretary of State**

**Entity Name:** COLLIER PARTNERS FOR PAWS FOUNDATION, INC.

**Current Principal Place of Business:**

6530 DUDLEY DRIVE  
NAPLES, FL 34105

**New Principal Place of Business:**

**Current Mailing Address:**

6530 DUDLEY DRIVE  
NAPLES, FL 34105

**New Mailing Address:**

**FEI Number:** 20-2538340

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

PAULICH, JOHN ESQ.  
5147 CASTELLO DRIVE  
NAPLES, FL 34103 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: MADISON, ERIK J DVM  
Address: 6530 DUDLEY DRIVE  
City-St-Zip: NAPLES, FL 34105

Title: D ( ) Delete  
Name: AMBROSE, GAYEL L  
Address: 6530 DUDLEY DRIVE  
City-St-Zip: NAPLES, FL 34105

Title: D ( ) Delete  
Name: FOELLER, CHARLENE  
Address: 6530 DUDLEY DRIVE  
City-St-Zip: NAPLES, FL 34105

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GAYEL L. AMBROSE

D

02/17/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date