2010 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N04000010014

TI FILED

May 25, 2010

Secretary of State

Entity Name: COLLIER COUNTY LACROSSE ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

4765 WHISPERING PINE WAY

NAPLES, FL 34103

4827 TAHITI LANE

NAPLES, FL 34112

Current Mailing Address: New Mailing Address:

4765 WHISPERING PINE WAY 4827 TAHITI LANE NAPLES, FL 34103 NAPLES, FL 34112

FEI Number: 14-1916934 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CALKINS, EDWARD T
4765 WHISPERING PINE WAY
NAPLES, FL 34103 US
BISSELL, JULIE
4827 TAHITI LANE
NAPLES, FL 34112 US

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: JULIE BISSELL 05/25/2010

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Γitle: D

Name: BISSELL, JULIE
Address: 4827 TAHITI LANE
City-St-Zip: NAPLES, FL 34112

Title: D

Name: CLAUSSEN, CHRISTOPHER G

Address: 2134 SEVILLA WAY City-St-Zip: NAPLES, FL 34109

Title: D

Name: FRIEDMANN, MICHAEL
Address: 10109 WINCHESTER WOOD

City-St-Zip: NAPLES, FL 34109

Title:

Name: ADIUTORI, FRANK Address: 652 MUREX DRIVE City-St-Zip: NAPLES, FL 34102

Title:

Name: KENZIE, MARGOT Address: 109 EUGENIA DRIVE City-St-Zip: NAPLES, FL 34108

I hereby 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 all other like empowered.

SIGNATURE: JULIE BISSELL D 05/25/2010