2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000005379

FILED May 01, 2009 Secretary of State

Entity Name: COLLIER COUNTY DOLLARS FOR SCHOLARS, INC

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

9700 BENT GRASS BEND NAPLES, FL 34108

Current Mailing Address: New Mailing Address:

9700 BENT GRASS BEND NAPLES, FL 34108

FEI Number: 26-0073843 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

MAZZITELLI, MARTHA 9740 BENT GRASS BEND NAPLES, FL 34108

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:

Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition BALL, B. SCOTT BALL, B. SCOTT Name: Name: Address: 8231 BAY COLONY DRIVE Address: 8700 BAY COLONY DRIVE

City-St-Zip: NAPLES, FL 34108 City-St-Zip: NAPLES, FL 34108

Title: () Delete Title: D (X) Change () Addition

Name: BEAL, JOHN Name: BEAL, JOHN Address: 8665 BAY COLONY DRIVE Address:

8700 BAY COLONY DRIVE City-St-Zip: NAPLES, FL 34108 City-St-Zip: NAPLES, FL 34108

Title: () Delete Title: (X) Change () Addition

MURRAY, KEN MURRAY, KEN Name: Name: 8665 BAY COLONY DRIVE 8700 BAY COLONY DRIVE Address: Address:

City-St-Zip: NAPLES, FL 34108 City-St-Zip: NAPLES, FL 34108

Title: () Delete Title: (X) Change () Addition

Name: MAZZITELLI, MARTHA Name: MAZZITELLI, MARTHA 9740 BENT GRASS BEND Address: 9700 BENT GRASS BEND Address: City-St-Zip: NAPLES, FL 34108 City-St-Zip: NAPLES, FL 34108

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: MARTHA MAZZITELLI Т 05/01/2009