

**2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Jul 17, 2012**  
**Secretary of State**

DOCUMENT# N08000009359

**Entity Name:** COLLIER COMMUNITY CAT COALITION, INC.**Current Principal Place of Business:**5801 PELICAN BAY BLVD  
104  
NAPLES, FL 34108**New Principal Place of Business:****Current Mailing Address:**PO BOX 990908  
NAPLES, FL 34116**New Mailing Address:****FEI Number:** 26-3541598**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**MACHEN, A KEITH ESQ.  
5801 PELICAN BAY BLVD.  
SUITE 104  
NAPLES, FL 34108 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: DIR  
Name: PIPER, LORI  
Address: 1460 21ST STREET SW  
City-St-Zip: NAPLES, FL 34117

Title: DIR  
Name: SORBARA, MEGAN  
Address: 141 9TH ST NW  
City-St-Zip: NAPLES, FL 34120

Title: DIR  
Name: EISEL, RANDALL DVM  
Address: 2171-B PINE RIDGE RD  
City-St-Zip: NAPLES, FL 34109

Title: DIR  
Name: MATOS, ANNIKA  
Address: 26686 LITTLE JOHN CT #75  
City-St-Zip: BONITA SPRINGS, FL 34135

Title: DIR  
Name: WRIGHT, STEPHEN  
Address: 1080 MILANO DRIVE  
City-St-Zip: NAPLES, FL 34103

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: LORI PIPER

DIR

07/17/2012

Electronic Signature of Signing Officer or Director

Date