2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 05, 2012
Secretary of State

DOCUMENT# N09830

Entity Name: COLLIER COUNTY SHERIFF'S OFFICE BENEFIT FUND COMMITTEE, INCORPORATED

Current Principal Place of Business:

3319 E. TAMIAMI TR.
NAPLES, FL 341124902 US

New Principal Place of Business:

Current Mailing Address:

3319 E. TAMIAMI TR.
NAPLES, FL 341124902 US

New Mailing Address:

FEI Number: 65-0722892 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: P
Name: LAUER, ANTHONY P
Address: 3319 E. TAMIAMI TR.
City-St-Zip: NAPLES, FL 341124902

Title: VP
Name: SCOTT, JOSEPH
Address: 3319 E TAMIAMI TR.
City-St-Zip: NAPLES, FL 341124902

Title: S
Name: HUNT, LINDA
Address: 3319 E. TAMIAMI TR.
City-St-Zip: NAPLES, FL 341124902

Title: T
Name: MILLER, BARBARA A
Address: 3319 E TAMIAMI TR
City-St-Zip: NAPLES, FL 341124902

Title: VP
Name: MARAN, LINDA
Address: 3319 E TAMIAMI TR
City-St-Zip: NAPLES, FL 341124902

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: BARBARA A MILLER T 01/05/2012

Electronic Signature of Signing Officer or Director Date