2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 02, 2003 8:00 am
Secretary of State
05-02-2003 90390 013 ****61.25

DOCUMENT # N09830

1. Entity Name

COLLIER COUNTY SHERIFF'S OFFICE BENEFIT FUND COM MITTEE, INCORPORATED

Principal Place of Business	Mailing Address
3301 E. TAMIAMI TR. BLDG. J NAPLES FL 34112 US	3301 E. TAMIAMI TR.. BLVD. J. NAPLES FL 34112 US

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip: 34112-4902 Country:	Zip: 34112-4902 Country:

4. FEI Number 65-0722892 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

LAUER, ANTHONY P
3301 E. TAMIAMI TR.
BUILDING J.
NAPLES FL 34112

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City FL Zip Code 34112-4902

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Anthony P Lauer 4/29/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD LAUER, ANTHONY P 3301 E. TAMIAMI TR. BLDG. J NAPLES FL 34112	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 34112-4902
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD HEBEBRAND, KAREN 3301 E. TAMIAMI TR. BLDG. J NAPLES FL 34112	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 34112-4902
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD HUNT, LINDA 3301 E. TAMIAMI TR. BLDG. J NAPLES FL 34112	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 34112-4902
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ANDERSON, SCOTT 3301 E. TAMIAMI TR. BLDG. J NAPLES FL 34112	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 34112-4902
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD MILLER, BARBARA 3301 E TAMIAMI TRAIL BLDG J NAPLES FL 34112	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 34112-4902
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BRANHAM, LESA 3301 E. TAMIAMI TR. BLDG. J NAPLES FL 34112	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition Nottle, Lesa 34112-4902

CR2E037 (10/02)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Barbara Miller RECEIVED Barbara Miller 4-25-03 239-793-9331
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #