

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14213

FILED  
Apr 28, 2011  
Secretary of State

**Entity Name:** FRIENDS OF COLLIER COUNTY MUSEUM, INC.

**Current Principal Place of Business:**

COLLIER COUNTY MUSEUM  
3301 TAMiami TRAIL EAST  
NAPLES, FL 34104

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 2181  
NAPLES, FL 34102 US

**New Mailing Address:**

FEI Number: 59-2653840

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MASTANDREA, TERRY  
291 LEAWOOD CIRCLE  
NAPLES, FL 34104 US

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

MCKINLEY, CATHY  
47 GLADES BLVD #2  
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: CATHY MCKINLEY

04/28/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: LITT, LAWRENCE  
Address: 4864 LASQUETI WAY  
City-St-Zip: NAPLES, FL 34119

Title: VP 1  
Name: LOUIS, STICKLES III  
Address: 270 COLUMBUS WAY  
City-St-Zip: MARCO ISLAND, FL 34145

Title: VP 2  
Name: GAIL, PICA  
Address: 2042 E. CROWN PTE BLVD  
City-St-Zip: NAPLES, FL 34112

Title: S/T  
Name: LITT, SUSAN  
Address: 4864 LASQUETI WAY  
City-St-Zip: NAPLES, FL 34119

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: LAWRENCE LITT

PRES

04/28/2011

Electronic Signature of Signing Officer or Director

Date