

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14713

FILED
Jan 16, 2009
Secretary of State

Entity Name: COLLIER COUNTY CHILD ADVOCACY COUNCIL, INC.

Current Principal Place of Business:

1036 6TH AVE N.
NAPLES, FL 34102 US

New Principal Place of Business:

Current Mailing Address:

1036 6TH AVE N.
NAPLES, FL 34102 US

New Mailing Address:

FEI Number: 65-0049492

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALLACE, DEBRA
1036 6TH AVENUE NORTH
NAPLES, FL 34106 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: V () Delete
Name: SMITH, TOM
Address: 1036 SIXTH AVE N
City-St-Zip: NAPLES, FL 34102

Title: P () Delete
Name: FUSON, PALMA
Address: 1036 6TH AVE N.
City-St-Zip: NAPLES, FL 34102 US

Title: S () Delete
Name: BRETZMANN, SONIA
Address: 1036 6TH AVE N.
City-St-Zip: NAPLES, FL 34102 US

Title: T () Delete
Name: GOEHLER, JIM
Address: 1036 6TH AVE N.
City-St-Zip: NAPLES, FL 34102 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: P (X) Change () Addition
Name: ULLRICH, JACK
Address: 1036 6TH AVE N.
City-St-Zip: NAPLES, FL 34102 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JACQUELINE GRIFFITH STEPHENS

CEO

01/16/2009

Electronic Signature of Signing Officer or Director

Date