FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

N18627

(2)

COLLIER COUNTY PLUMBING AND MECHANICAL CONTRACTORS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

PO BOX 990071 NAPLES FL 33999-3060 PO BOX 990071 NAPLES EL 34116-6060

FILED May 20 1997 8:00am Secretary of State



MAPLEO FE 03	1998-3000			MILLO IL STITOGOGO						
								3. Date Incorporated or Qualified 01/06/1987 04/30/1996		
2. Principal P	lace of Busi	ness		28. Mailing Address				4. FEI Number Applied For		
Suite, Apt. #, etc.				26				65-0161167 Not Applicable		
22			27	- 				5. Certificate of Status Desired S8.75 Additional Fee Required		
City & State	e		ļ,	City & State	:			6. Election Campaign Financing \$5.00 May Be		
23			28	l. 	1			Trust Fund Contribution Added to Fees		
Zip		Country		Zip I	Gou	intry		8. This corporation has liability for intangible tax under s. 199.032,		
2434116-6060 25 29 30							Florida Statutes Yes Y No 10. Name and Address of New Registered Agent			
	4 , 1101110	and readings of Carron	· · · · · · · · · ·	otoroa rigorit		81	Name			
CLASTIC MOVIA						<u> </u>				
CLAVELO, VICKI A. 3610 21ST AVE., SOUTHWEST NAPLES FL 33964						82 Street Address (P.O. Box Number is Not Acceptable)				
						83				
MAPLES) FL 03804	•								
						84	City	FL 85 Zip Code 34117		
11. Pursuent l	to the provis	ions of Sections 617 050	2 and I	617 1508 Florida Statul	tes the at	2010	a-nemed	d corporation submits this statement for the purpose of changing its registered		
OTTICE OF F	egistereo ad	ent, or both, in the State th, and accept the obliga	of Flor	ida. Such chance was	authorizo	d bv	' the corp	rporation's board of directors. I hereby accept the appointment as registered		
SIGNATURE	Signature, typed	or printed name of registered ago	nt and titl	le if app'icable. (NO)	IE: Registered	d Aper	nt signature	re required when reinstating) DATE		
12.		OFFICERS ANI) DIRE	CTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P			X DELETE	1.11	TLE		P Change Additio		
NAME	MELON	ey, R. David			1.Þ N/	AME		BROUGHTON, Joseph		
STREET ADDRESS	1916 4	OTH TERRACE, SW			1.B ST	REET.	ADDRESS			
CITY-ST-ZIP	NAPLE	S FL			1,4 Cł	TY-SI	T-ZIP	Bonita Springs, FL 34133		
TITLE	٧			≯ □ DELETE	2.1 11	TLE		VChange		
NAME		is, allen d.			2.2 N	AMÉ		MELONEY, R. David		
STREET ADDRESS		SUN CENTURY ROAL)		2.B ST	REET.	ADDRESS			
CITY-ST-ZIP	NAPLE	S FL			2,4 C	ITY-S	ST - 21P	Naples FI 34116		
TITLE	ST			☐ DELETE	3.N TH	TLE		S/T Change Addition		
NAME		MAN, DANIEL			3.2 N/	AME		ANDERMAN, DANIEL		
STREET ADDRESS		LSA STREET			3.B S1	REET.	ADDRESS	Troo remove to the first		
CITY-ST-ZIP	NAPLE	S FL			3.4. C	11Y-S	31 - ZIP	Naples, FL 34109		
TITLE	D			☐ DELETE	4.1 11	TLE		D		
NAME		Y, JAMES			4.2 N]	BIERLEY, JAMES		
STREET ADDRESS		EXCHANGE AVE					ADDRESS	4303-A Exchange Avenue Naples, FL 34104		
CITY-ST-ZIP	NAPLE	5 FL		Bereze	4.4 CI		1-ZIP			
TITLE	D	TA FAMILEA		☐ DELETE	5.1111			D Change Additio		
NAME		ATO, EDWARD			5.P N/			DI DONATO, Edward		
STREET ADDRESS		RD AVENUE, NW					ADDRESS	The state of the s		
CITY-ST-ZIP	NAPLE) rL		DELETE	5.4 CI		1 - ZIP	Naples, FL 34119		
TITLE	DEDAA	LVICTOR		L J Utitit	6.h Tr			D Change Additio		
NAME OTREET ADODGES		I, VICTOR			6.2 N/			PEROSI, Victor		
STREET ADDRESS	ALABA PL	RINCESS COURT					ADDRESS	1910 Princess Court		
City-St-ZiP	NAPLE	The information supplier	- with	this filing does not avail	6.4 CI	14.81	I-7IP	Naples, FL 34110 stated in Section 119.07(3)(i), Florida Statutes, I further certify that the		
informatio I am an of	n indicated fficer or dire	on this annual report or s	uppler the re	mental annual report is I ceiver or trustee empov	true and a vered to e	accu	rate and	state in Section 119.07 (3)(), Florida Statutes, Turtine certify that the id that my signature shall have the same legal effect as if made under oath; the report as required by Chapter 617, Florida Statutes; and that my name		
			•							