## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N23551

Apr 30, 2004 Secretary of State

Entity Name: AMI OF COLLIER COUNTY, INC.

**Current Principal Place of Business: New Principal Place of Business:** 5020 TAMIAMI TRAIL N #106 NAPLES, FL 34103 **New Mailing Address: Current Mailing Address:** 5020 TAMIAMI TRAIL N #106 NAPLES, FL 34103 US FEI Number: 65-0047747 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HUNTER, KATHRYN 4658 SANTIAGO LANE BONITA SPRINGS, FL 34134 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition COLLETT, PAMELA PACE, ROSEMARY Name: Name: 5020 TAMIAMI TRAIL NORTH #106 Address: 6075 PELICAN BAY BLVD, #1405 Address: City-St-Zip: NAPLES, FL 34103 City-St-Zip: NAPLES, FL 34108 Title: PD Title: (X) Change ( ) Addition () Delete Name: EVANS, JUDY Name: EVANS, JUDITH Address: 5312 BILLINGS STREET Address: 5312 BILLINGS STREET City-St-Zip: LEHIGH ACRES, FL 33971 City-St-Zip: LEHIGH ACRES, FL 33971 Title: VPD () Delete Title: () Change () Addition LERNWIG, ROBERT Name: Name: 4301 GULFSHORE DR #203 Address: Address: City-St-Zip: NAPLES, FL 34103 City-St-Zip: ( ) Delete Title: SD Title: SD (X) Change ( ) Addition LANG, SUSAN Name: LANG, SUSAN Name: 7540 CAMERON CIR 12810 DEVONSHIRE LAKES CIR Address: Address: City-St-Zip: FORT MYERS, FL 33912 City-St-Zip: FORT MYERS, FL 33913 Title: () Delete Title: ( ) Change (X) Addition SULLIVAN, JACK Name: Name: 6820 PELICAN BAY BLVD #125 Address: Address: City-St-Zip: City-St-Zip: NAPLE, FL 34108 Title: () Delete Title: ( ) Change (X) Addition CARMICHAEL, KEVIN Name: Name: Address: Address: 4501 TAMIAMI TR N #300 NAPLES, FL 34103 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JUDITH EVANS DP 04/30/2004

ARLENE AUSTIN, DIRECTOR 5811 PELICAN BAY BLVD#201 NAPLES, FL 34102

MIKE GARONE,, DIRECTOR 4001 SANTA BARBARA BLVD NAPLES, FL 34102

NANCY WALLACE, DIRECTOR 900 LAMBIANCE CIR, #101 NAPLES, FL 34102

MARGARET SPRINGER, DIRECTOR 100 - 5TH AVE S NAPLES, FL 34102

PAT SCOONES, DIRECTOR 5020 TAMIAMI TR N, #106 NAPLES, FL 34103

MARK LINDNER, DIRECTOR 2206 MAJESTIC CT N NAPLES, FL 34108

JOE AND LORRAINE PADULO, DIRECTOR 455 COVE TOWERS, #1703 NAPLES, FL 34110

VICKIE FREEMAN, DIRECTOR 1469 ST CLAIRE SHORES NAPLES, FL 34104

BOB EMANUEL, DIRECTOR 190 MANOR BLVD #1006 NAPLES, FL 34104

VICKIE FREEMAN, DIRECTOR 1469 ST CLAIRE SHORES

BOB EMANUEL, DIRECTOR 190 MANOR BLVD #1006 NAPLES, FL 34104