2000 UNIFORM BUSINESS REPORT (UBR)

FILED May 16, 2000 8:00 am Secretary of State **DOCUMENT # N38823** 1. Entity Name, PROFESSIONAL GIVERS ANONYMOUS OF COLLIER COUNTY. 05-16-2000 90120 004 ****61.25 Principal Place of Business Mailing Address 1167 THIRD STREET SOUTH, SUITE 107 1167 THIRD STREET SOUTH, SUITE 107 NAPLES FL 34102-7037 NAPLES FL 33940 2. Principal Place of Business 3. Mailing Address 4001 TamiamiTrailNorth 4001 Tamiami Trail DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Suite 404 <u> Juite</u> 404 Applied For City & State 4. FEI Number City & State 65-0213073 Not Applicable Country **\$8.75** Additional 5. Certificate of Status Desired Fee Required USA USA 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) **BOND. SCHOENECK & KING** 1167 THIRD STREET SOUTH NAPLES FL 33940 Zip Code City 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. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Make Check Pavable to 9. Election Campaign Financing **FILE NOW:** \$5.00 May Be Trust Fund Contribution. Added to Fees **Department of State** FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. Change Addition TITLE ☐ Delete TITLE See attached NAME NAME Wasmer, John C. 110t of additional Directors STREET ADORESS STREET ADDRESS 4301 CUTLASS LANE CITY-ST-ZIP CITY-ST-ZIP NAPLES FL ☐ Addition TITLE PD ☐ Delete TITLE ☐ Change NAME! BROWN, HAROLD, REV. NAME STREET ADDRESS STREET ADDRESS 105 ST. ANDREWS BLVD. CITY-ST-ZIP CITY-ST-ZIP NAPLES FL TITLE. **VPD** Delete TITLE Change ☐ Addition NAME MAGIN, LESLIÉ M NAME STREET ADDRESS 3100 GORDON DRIVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NAPLES FL TITLE ☐ Change ☐ Addition ☐ Delete TITLE COLE, MARTHA NAME NAME STREET ADDRESS STREET ADDRESS 393 SPRING LINE DR CITY-ST-7/P CITY-ST-ZIP NAPLES FL ☐ Change ☐ Addition ☐ Delete TITLE TITLE MEEHAN, PATRICIA K NAME NAMÉ STREET ADDRESS STREET ADDRESS 406 TWELFTH AVE S CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34102 ☐ Addition ☐ Change TITLE ☐ Delete TITLE

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.

NAME

STREET ADDRESS

CITY-ST-ZIP

SULLIVAN, JUDY

NAPLES FL 34103

375 BOW LINE DRIVE

NAME

STREET ADDRESS

CITY-ST-ZIP

STATE OF THE STATE

Patricia K. Mochan April 272000 941-262-0061

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Document #N38823
FEIN #65-0213073
PROFESSIONAL GIVERS ANONYMOUS OF COLLIER COUNTY, INC.

11. Additions to Officers and Directors in 10:

Director
Dru Dohrman
3430 Fort Charles Drive
Naples, FL 34102

Director James R. Hartzell 3060 Fort Charles Drive Naples, FL 34102

Director
Jayme Klein
4401 Gulf Shore Boulevard North
Naples, Fl 34103

Director Patricia Kraus 2976 Gordon Drive Naples, FL 34102

Director G. Donald Love 1100 Spyglass Lane Naples, FL 34102

Director Sally Poter 7515 Pelican Bay Boulevard Naples, Fl 34108

Director Rebecca Zaiser 1901 Curling Avenue Naples, FL 34109