

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N38823

FILED  
Feb 25, 2009  
Secretary of State

**Entity Name:** PROFESSIONAL GIVERS ANONYMOUS OF COLLIER COUNTY, INC.

**Current Principal Place of Business:**

1801 GULF SHORE BLVD N. STE 503  
NAPLES, FL 34102 US

**New Principal Place of Business:**

1801 GULF SHORE BLVD N #503  
NAPLES, FL 34102 US

**Current Mailing Address:**

1801 GULF SHORE BLVD N. STE 503  
NAPLES, FL 34102 US

**New Mailing Address:**

1801 GULF SHORE BLVD N #503  
NAPLES, FL 34102 US

**FEI Number:** 65-0213073

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WASMER, MARY M  
1801 GULF SHORE BLVD NO  
SUITE 503  
NAPLES, FL 34102 US

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

WASMER, MARY M  
1801 GULF SHORE BLVD N  
#503  
NAPLES, FL 34102 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:

02/25/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: WASMER, MARY M  
Address: 1801 GULF SHORE BLVD #503  
City-St-Zip: NAPLES, FL 34102

Title: TD ( ) Delete  
Name: HOLMES, ROBERT  
Address: 2545 LANTERN LANE  
City-St-Zip: NAPLES, FL 34102

Title: VPD ( ) Delete  
Name: MAGIN, LESLIE M  
Address: 1801 GULF SHORES BLVD #802  
City-St-Zip: NAPLES, FL 34102

Title: D ( ) Delete  
Name: WASMER, MARTIN M  
Address: 3505 GORDON DR  
City-St-Zip: NAPLES, FL 34102

Title: S ( ) Delete  
Name: FARRELL, JOANNE  
Address: 191 23RD STREET SW  
City-St-Zip: NAPLES, FL 34117

Title: D ( ) Delete  
Name: SULLIVAN, JUDY  
Address: 375 BOW LINE DRIVE  
City-St-Zip: NAPLES, FL 34103

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: WASMER, MARY M  
Address: 1801 GULF SHORE BLVD N #503  
City-St-Zip: NAPLES, FL 34102

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

Title: VPD (X) Change ( ) Addition  
Name: MAGIN, LESLIE M  
Address: 1801 GULF SHORE BLVD N #802  
City-St-Zip: NAPLES, FL 34102

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

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: JOANNE FARRELL

S

02/25/2009

Electronic Signature of Signing Officer or Director

Date