

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42710

FILED
Aug 26, 2004
Secretary of State**Entity Name:** FIRE SERVICE STEERING COMMITTEE OF COLLIER COUNTY, FLORIDA, INC.**Current Principal Place of Business:**4798 DAVIS BLVD.
NAPLES, FL 33942**New Principal Place of Business:****Current Mailing Address:**4798 DAVIS BLVD.
NAPLES, FL 33942**New Mailing Address:****FEI Number:** 65-0260235**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**CANNON, THOMAS G.
4798 DAVIS BLVD.
NAPLES, FL 33942 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: TD () Delete
Name: MCMAHON, CHUCK
Address: 4741 GOLDEN GATE PKWY
City-St-Zip: DAYTONA BEACH, FL 32116

Title: VPD () Delete
Name: ECKHARDT, GEORGE
Address: 13240 EMMOKALEE
City-St-Zip: NAPLES, FL 34120

Title: PD () Delete
Name: CANNON, THOMAS G.,
Address: 4798 DAVIS BLVD.
City-St-Zip: NAPLES, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: MCMAHON, CHUCK
Address: 4741 GOLDEN GATE PKWY
City-St-Zip: DAYTONA BEACH, FL 32116

Title: PD (X) Change () Addition
Name: ECKHARDT, GEORGE
Address: 13240 EMMOKALEE
City-St-Zip: NAPLES, FL 34120

Title: TD (X) Change () Addition
Name: CANNON, THOMAS G.,
Address: 4798 DAVIS BLVD.
City-St-Zip: NAPLES, FL

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: THOMAS G. CANNON

TD

08/26/2004

Electronic Signature of Signing Officer or Director

Date