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NONPROFIT CORPORATION ANNUAL REPORT
1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N44130 (5)

1. Corporation Name
GIRLS INCORPORATED OF COLLIER COUNTY

Principal Place of Business	Mailing Address
2801 COUNTY BARN RD NAPLE S 33962 US	POST OFFICE BOX 8896 NAPLES FL 33941

2. Principal Place of Business	2a. Mailing Address
21 2801 County Barn Rd	26 P.O. Box 8896
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State: Naples, FL. 33962	28 City & State: Naples, FL. 33941
24 Zip: 33962 / 25 Country: Collier	29 Zip: 33941 / 30 Country: Collier

3. Date Incorporated or Qualified: 06/27/1991
3a. Date of Last Report: 06/27/1995
4. FEI Number: 65-0279110 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

FAERBER, NELSON A JR
2335 N TAMIAMI TRAIL, STE 505
NAPLES FL 33940

10. Name and Address of New Registered Agent

81 Name: Mary Pat Hussey
82 Street Address (P.O. Box Number is Not Acceptable): 1350 Spyglass Lane
83
84 City: Naples FL 85 Zip Code: 33940

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: Mary Pat Hussey — 4-29-96
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HUSSEY, MARY PAT 1350 SPYGLASS LANE NAPLES FL	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	D Hussey, Mary Pat 1350 Spyglass Lane Naples, FL. 33940	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D FAERBER, NELSON E 2335 TAMIAMI TRAIL N, STE 505 NAPLES FL	☒ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	D Smith, Lindsey Forte 187 Tenth Ave. South Naples, FL. 33940	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D RUCKER, ROBIN 5159 31ST AVE SW NAPLES FL	☒ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	D Nichols, Arlene 6915 Oakmont Parkway Naples, FL 33963	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Mary Pat Hussey — 4-29-96 — (941)261-8890
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

MARY PAT HUSSEY