

8/25/2002-90196-0

FILED

Sep 05, 2002 8:00 am
Secretary of State

08-25-2002 90196 024 ****61.25

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N50209

1. Entity Name

PUBLIC RELATIONS ASSOCIATION OF COLLIER COUNTY I
NC.

Principal Place of Business	Mailing Address
P.O. BOX 3063 NAPLES FL 34101-063 US	2271 SANDPIPER ST. NAPLES FL 34102 US

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State

City & State	City & State
MARCO ISLAND, FL	MARCO ISLAND, FL

Zip	Country	Zip	Country
34145	USA	34145	USA

4. FEI Number	Applied For
65-0378828	Not Applicable

5. Certificate of Status Desired	\$8.75 Additional Fee Required
☐	

8. Name and Address of Current Registered Agent

SEELY-TROIANO, VIVIAN
1908 COUNTERS CT
NAPLES FL 34110

7. Name and Address of New Registered Agent

Name	MARGIE HAPKE
Street Address (P.O. Box Number is Not Acceptable)	816 W. ELKAM CIRCLE #306
City	MARCO ISLAND FL
Zip Code	34145

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE	MARGIE HAPKE	7/18/02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered agent signature required when reinstating)		

After September 13, 2002,
min. will be \$236.25.9. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to FeesMake Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE	P	NAME	GARCIA, SOPHIA	STREET ADDRESS	1029 AVERLY ST	CITY-ST-ZIP	FORT MYERS FL 33919	☒ Delete
TITLE	VP	NAME	CHANDLER, DEBBIE	STREET ADDRESS	9781 BOB WHITE LN	CITY-ST-ZIP	BONITA SPRINGS FL 34135	☒ Delete
TITLE	S	NAME	MEISTER, TRISTA	STREET ADDRESS	2271 SANDPIPER ST.	CITY-ST-ZIP	NAPLES FL 34102	☒ Delete
TITLE	T	NAME	SEELY-TROIANO, VIVIAN	STREET ADDRESS	1908 COUNTERS CT	CITY-ST-ZIP	NAPLES FL 34110	☒ Delete
TITLE	D	NAME	MUCK, GERRI	STREET ADDRESS	5037 TAMiami TR. E	CITY-ST-ZIP	NAPLES FL 34113	☒ Delete
TITLE	D	NAME	LANDOLT, GRETCHEN	STREET ADDRESS	1095 WHIPPERWILL LN	CITY-ST-ZIP	NAPLES FL 34105	☒ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PRESIDENT	NAME	MARGIE HAPKE	STREET ADDRESS	816 W. ELKAM CIRCLE #306	CITY-ST-ZIP	MARCO ISLAND, FL 34145	☐ Change ☒ Addition
TITLE	VICE PRESIDENT	NAME	CINDY DOBINS	STREET ADDRESS	107 MADISON DRIVE	CITY-ST-ZIP	NAPLES FL 34110	☐ Change ☒ Addition
TITLE	SECRETARY	NAME	AILEEN KENNEDY	STREET ADDRESS		CITY-ST-ZIP		☐ Change ☒ Addition
TITLE	TREASURER	NAME	JANET WASH BURN	STREET ADDRESS	2911 Tamiami Trail	CITY-ST-ZIP	Naples FL 34103	☐ Change ☒ Addition
TITLE	D	NAME	EILEEN C. MCKAY	STREET ADDRESS	1454 MADISON AVE.	CITY-ST-ZIP	INNOVATION, FL 34142	☐ Change ☒ Addition
TITLE	D	NAME	BOB MUMBY	STREET ADDRESS	Michelle Balon	CITY-ST-ZIP	4711 St. George Lane	☐ Change ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 filer information.

SIGNATURE: MARGIE HAPKE 7/18/02 941-642-1120

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2026 TAMIAAMI TRAIL NORTH
NAPLES, FLORIDA 34102

CR2037 (4/02)