2006 NOT-FOR-PROFIT CORPORATION

CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

TITLE

NAME

NAPLES, FL

WEISS, MARY LOU

NAPLES, FL 34103

2618 13TH ST. N.

DC:

Apr 13, 2006 8:00 am Secretary of State **ANNUAL REPORT** DOCUMENT # N93000005477 04-13-2006 90312 020 ****61.25 1. Entity Name COLLIER COUNTY ASSOCIATION FOR THE BLIND, INC. Principal Place of Business Mailing Address C/O GOLDEN GATE COMMUNITY CENTER C/O GOLDEN GATE COMMUNITY CENTER 4701 GOLDEN GATE PARKWAY **4701 GOLDEN GATE PARKWAY** NAPLES, FL 33999 NAPLES, FL 33999 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04072006 Chg-NP CR2E037 (11/05) City & State City & State Applied For 4. FEI Number 65-0458413 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent KNAUER, EDWARD B Street Address (P.O. Box Number is Not Acceptable) 501 GOODLETTE ROAD N SUITE D-100 NAPLES, FL City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 **\$5.00** May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2006 Added to Fees OFFICERS AND DIRECTORS 10. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE TITLE ☐ Delete Helen M. Smith HOOVEN, BETTY NAME NAME 204 Furse Lakes Cir. +2 4774 EUROPA DRIVE STREET ADDRESS STREET ADDRESS Naples, FL 34104 CITY-ST-ZIP NAPLES, FL 34105 CITY-ST-ZIP T □ Detete TITLE TITLE ☐ Change **X** Addition DELFINO, GERALDINE ANN KITK NAME NAME 752 LAMBton LANE 3533 WINFRED DR ROW #3104 STREET ADDRESS STREET ADDRESS Naples, FL 34104 CITY-ST-ZIP NAPLES, FL 34104 CITY-ST-ZIP Delete TITLE TITLE Change Addition michael Denti BOCCUZZI, ANITA NAME NAME: 7737 Jewel LANE#103 STREET ADDRESS 4 OCEAN BLVD STREET ADDRESS Napies, FL 34109 CITY-ST-7IP NAPLES, FL 34104 CITY-ST-ZIP Delete Þ TITLE TITLE □ Change Addition MCNIEL, CLAIRE DOLLY MINGHI NAME NAME 184 Furse LAKES Cir., # 11 53 HIGH POINT CIRCLE #302 STREET ADDRESS STREET ADDRESS Naples, FL 34104 CITY-ST-ZIP NAPLES, FL 34103 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition Robert Weaver OBLOY, CLARE NAME NAME 3310 29th AUE. SW STREET ADDRESS 4400 17 PL SE STREET ADDRESS Naples, FL 34117

FILED

☐ Change

■ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 chapter of the property with an endress with all other like empowered.

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

☐ Delete

SIGNATURE:	Helm Helm	M Lind	Haren	m.	Sm 1 TH	4/8/16	234-41	060
	SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					Date	Daytime Phone #	

ATTACHMENT 40047681 # 1930000005477 COLLIER COUNTY ASSOCIATION FOR THE BLIND INC.

COLLIER COUNTY
ASSOCIATION FOR
THE BLI ND, IRC.

GOLDEN GATE COMMUNITY CENTER, 4701 GOLDEN GATE PARKWAY - NAPLES, FLORIDA 34116

APRIL 81 2006

TO: DIVISION OF CORPORATIONS

PROM: COWIER COUNTY ASSOC, FOR THE SUMP, INC.

RE: BOL NON-PROVER CORPORATION

ENCLOSED IS THE MBOVE FUNUAL REPORT
TOGETHER WIFH CITICA IN THE TIMOUNT OF

THANK YOU.

Release Course ASSOC. FOR THE BUD S

CC: EDWARD B. KATUER, ASY