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Apr 02 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mogham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N94000004532 (7)**

1. Corporation Name

**FRIENDS OF PARKS OF COLLIER COUNTY, INC.**

Principal Place of Business  
**\$300 SANTA BARBARA BLVD.  
NAPLES FL 33999**

Mailing Address  
**3300 SANTA BARBARA BLVD.  
NAPLES FL 33999**

3. Date Incorporated or Qualified

**09/14/1994**

4. FEI Number

**NOT APPLICABLE**

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

6. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00 May Be  
Added to Fees**

7. Is this nonprofit corporation a homeowners association?  
☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CORPORATION INFORMATION SERVICES INC.  
1201 HAYS ST.  
TALLAHASSEE FL 32301**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

**FL**

85 Zip Code

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

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 ☒ DELETE  
NAME **D DEAGUSTINO, CINDY**  
STREET ADDRESS **570 23RD ST SW**  
CITY-ST-ZIP **NAPLES FL 33964**

1.1 TITLE ☒ Change ☐ Addition  
1.2 NAME **Desiree Guokas**  
1.3 STREET ADDRESS **5921 12th Ave. SW**  
1.4 CITY-ST-ZIP **Naples, FL 34116**

TITLE ☒ DELETE  
NAME **D FERRERA, TOM**  
STREET ADDRESS **122 MADISON DR**  
CITY-ST-ZIP **NAPLES FL 33942**

2.1 TITLE ☒ Change ☐ Addition  
2.2 NAME **Sue Mara**  
2.3 STREET ADDRESS **223 Willowick Dr.**  
2.4 CITY-ST-ZIP **Naples, FL 34110**

TITLE ☒ DELETE  
NAME **D SIEGEL, NANCY**  
STREET ADDRESS **5840 12TH AVE**  
CITY-ST-ZIP **NAPLES FL 33999**

3.1 TITLE ☒ Change ☐ Addition  
3.2 NAME **Nancy Markham**  
3.3 STREET ADDRESS **4580 Eagle Key Circle**  
3.4 CITY-ST-ZIP **Naples, FL 34112**

TITLE ☒ DELETE  
NAME **D PEFFERS, STEVE**  
STREET ADDRESS **981 12TH AVENUE NE**  
CITY-ST-ZIP **NAPLES FL 33964**

4.1 TITLE ☒ Change ☐ Addition  
4.2 NAME **Mark Huffer**  
4.3 STREET ADDRESS **299 S. Heathwood Dr.**  
4.4 CITY-ST-ZIP **Marco Island, FL 34145**


TITLE ☒ DELETE  
NAME **D REID, WARD**  
STREET ADDRESS **845 SOUTH COLLIER BOULEVARD**  
CITY-ST-ZIP **MARCO ISLAND FL 33937**

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE ☒ DELETE  
NAME **D DIEHL, SCOTT**  
STREET ADDRESS **12TH AVENUE NE**  
CITY-ST-ZIP **IMMOKALEE FL 33964**

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME **Steve Peffers**  
6.3 STREET ADDRESS **981 12th Ave. N.E.**  
6.4 CITY-ST-ZIP **Naples, FL 34120**

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:  **Steve Peffers**

**3/30/98 941 353 0404**

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