

**2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 18, 2012  
Secretary of State**

DOCUMENT# N96000001718

Entity Name: COLLIER HOUSING ALTERNATIVES, INC.

**Current Principal Place of Business:**

6075 BATHEY LANE  
NAPLES, FL 34116

**New Principal Place of Business:**

**Current Mailing Address:**

6075 BATHEY LANE  
NAPLES, FL 34116

**New Mailing Address:**

FEI Number: 65-0664158      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SCHIMMEL, DAVID C  
6075 BATHEY LANE  
NAPLES, FL 34116    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: PD  
Name: SCHIMMEL, DAVID C  
Address: 6075 BATHEY LANE  
City-St-Zip: NAPLES, FL 34116

Title: TD  
Name: GELTEMEYER, SCOTT  
Address: 6075 BATHEY LANE  
City-St-Zip: NAPLES, FL 34116

Title: DS  
Name: MAYEU, KIM  
Address: 6075 BATHEY LANE  
City-St-Zip: NAPLES, FL 34116

Title: D  
Name: KELLY, SHAUN  
Address: 6075 BATHEY LANE  
City-St-Zip: NAPLES, FL 34116

Title: D  
Name: HAINES, KELLY  
Address: 6075 BATHEY LANE  
City-St-Zip: NAPLES, FL 34116

I hereby 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 all other like empowered.

SIGNATURE: KELLY HAINES

D

04/18/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date