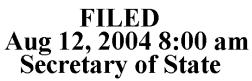
2004 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT



DOCUMENT # N9900006637					08-12-2004 90005 024 ****61.25				
1. Entity Name COLLIER COUNTY POLICE ACTIVITY LEAGUE, INC.									
	<u></u>		453						
3823 TAMIAMI TRAIL EAST PMB #422 3823		Mailing Address 3823 TAMIAMI TRAIL E/ NAPLES, FL 34112	B23 TAMIAMI TRAIL EAST PMB #422			24	ung-	127	
2 Principal F	ace of Business	3. Mailing Address							
330	1 Tamiani Trail East	Nancy C. mar	<u> Kham</u>			 	14 B Blist STATE STATE	#119# 1177F 18#	1107 01 7001
Blda.	#. etc. Planning de Resourch Burn	4580 Eagle	Key Circl	و	07262004 C	hg-NP —	CR2E037	<u> </u>	
City & State	2. Florida	City & State	y -		4. FEI Number NOT APPLI	CABLE		_ 	plied For t Applicable
Zip	Country	Zip	Country	_	5. Certificate of Si	tatus Desired		8.75 Add	
3411 2- 49	6. Name and Address of Current Re	34112-5205 egistered Agent	Collie	<u> </u>	7. Name and Add	iress of New F			
CARPENT	ER, DAVID B		Name		·				
680 LUISA LANE UNIT #2			Street A	Street Address (P.O. Box Number is Not Acceptable)					
NAPLES, I	FL 34104					<u>.</u>		· · ·	
			City				FL	Zip Code	∋
	named entity submits this statement for toos of registered agent.	the purpose of changing its	registered office of	r register	red agent, or both, in	the State of Fl	orida. I am fa	miliar with,	and accept
SIGNATURE.							DATE		
	Sur lut 40. Tupudi or printac name curagisteradi agent and	d title d applicable. (NOTE	E: Registered Agant signa	ture required	(when reinstating)		DATE		
D	Filing Fee is \$61.25 ue by September 8, 2004		npaign Financing	ture required	\$5.00 May Be Added to Fees		take check		
10.	Filing Fee is \$61.25 ue by September 8, 2004 OFFICERS AND DIRE	9. Election Car Trust Fund C	npaign Financing Contribution.		\$5.00 May Be	-> Floi	lake check rida Departn	nent of St	10
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10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Filing Fee is \$61.25 ue by September 8, 2004 OFFICERS AND DIRE D BEATTY, REBECCA 4514 ACADIA LN. NAPLES, FL 34112	9. Election Car Trust Fund C ECTORS	mpaign Financing Contribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP		\$5.00 May Be Added to Fees	-> Floi	flaké check rida Departn RS AND DIRE	nent of St ECTORS IN	tate ,
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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 like empowered.