2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000068784

Entity Name: N.C.M. OF COLLIER COUNTY, INC.

FILED Apr 23, 2009 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
5770 SHIR NAPLES, I	RLEY STREET FL 34109 (JS			
Current Mailing Address:			New Maili	New Mailing Address:	
5770 SHIR NAPLES, I	RLEY STREET FL 34109 (JS			
FEI Number	: 65-0444315	FEI Number Applied For()	FEI Number Not Appl	licable () Certificate of Status Desired (X)	
Name and	d Address of (Current Registered Agent:	Name and	Address of New Registered Agent:	
1000 TÁM #201	OUGLAS A IAMI TRAIL NO FL 34102 US	DRTH			
	e named entity e of Florida.	submits this statement for the pur	pose of changing i	ts registered office or registered agent, or both,	
SIGNATUI	RE:				
	Electro	nic Signature of Registered Agent		Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ().			
OFFICER	S AND DIREC	TORS:	ADDITION	IS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	P (DEL DUCA, MI 2101 TARPON NAPLES, FL 3	ROAD	Title: Name: Address: City-St-Zip:	P (X) Change () Addition DEL DUCA, MICHAEL 2595 TARPON ROAD NAPLES, FL 34102	
Title: Name: Address: City-St-Zip:	V (DEL DUCA, AN 2002 KINGFIS NAPLES, FL 3	H ROAD	Title: Name: Address: City-St-Zip:	V (X) Change () Addition MORGAN, STEVE 9479 CORALEE AVENUE ESTERO, FL 33928	
Title: Name: Address: City-St-Zip:	V (MORGAN, STE 9479 CORALE ESTERO, FL (E AVENUE	Title: Name: Address: City-St-Zip:	V (X) Change () Addition PLAMONDON, GREG 4980 RUSTIC OAKS CIRCLE NAPLES, FL 34105	
Title: Name: Address: City-St-Zip:	V (PENROD, GRE 154 7TH STRE NAPLES, FL 3	ET	Title: Name: Address: City-St-Zip:	S (X) Change () Addition DEL DUCA, DAWN 2595 TARPON ROAD NAPLES, FL 34102	
Title: Name: Address: City-St-Zip:	V (DEL DUCA, AN 115 FLAME VII NAPLES, FL 3	NE DRIVE	Title: Name: Address: City-St-Zip:	T (X) Change () Addition FUENTES, SHAWN 10143 STERN CIRCLE NAPLES, FL 34109	
Title: Name: Address: City-St-Zip:	V (X PLAMONDON, 4980 RUSTIC NAPLES, FL 3	DAKS CIRCLE	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL DEL DUCA P 04/23/2009