

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000010559

Entity Name: THE FOUNDATION OF COLLIER COUNTY MEDICAL SOCIETY, INC.

FILED
Apr 30, 2019
Secretary of State
5953256381CC

Current Principal Place of Business:

121 GOODLETTE ROAD N
NAPLES, FL 34102

Current Mailing Address:

121 GOODLETTE ROAD N
NAPLES, FL 34102 US

FEI Number: 46-1391700

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DONAHUE, APRIL
121 GOODLETTE ROAD N
NAPLES, FL 34102 US

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

Officer/Director Detail :

Title DIRECTOR
Name DONAHUE, APRIL
Address 121 GOODLETTE ROAD N
City-State-Zip: NAPLES FL 34102

Title CHAIRMAN
Name RIVERA, ROLANDO MD
Address 121 GOODLETTE ROAD N
City-State-Zip: NAPLES FL 34102

Title DIRECTOR
Name BERNARD, REBEKAH M.D.
Address 121 GOODLETTE ROAD N
City-State-Zip: NAPLES FL 34102

Title DIRECTOR
Name BIALEK, JOSHUA
Address 121 GOODLETTE ROAD N
City-State-Zip: NAPLES FL 34102

Title DIRECTOR
Name BROWN, REISHA F M.D.
Address 121 GOODLETTE ROAD N
City-State-Zip: NAPLES FL 34102

Title SECRETARY, TREASURER
Name DARSTEK, JEREMY
Address 121 GOODLETTE ROAD N
City-State-Zip: NAPLES FL 34102

Title DIRECTOR
Name KOWAL, CATHERINE N M.D.
Address 121 GOODLETTE ROAD N
City-State-Zip: NAPLES FL 34102

Title DIRECTOR
Name HILL, ANDREW
Address 121 GOODLETTE ROAD N
City-State-Zip: NAPLES FL 34102

Continues on page 2

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: APRIL DONAHUE

DIRECTOR

04/30/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	DANNENBERG, MITCHELL
Address	121 GOODLETTE ROAD N
City-State-Zip:	NAPLES FL 34102