

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N23551

**Entity Name:** NAMI OF COLLIER COUNTY, INC.**Current Principal Place of Business:**6216 TRAIL BLVD.  
BUILDING C  
NAPLES, FL 34108**Current Mailing Address:**6216 TRAIL BLVD.  
BUILDING C  
NAPLES, FL 34108 US**FEI Number:** 65-0047747**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BAKER, PAMELA  
6216 TRAIL BLVD.  
BUILDING C  
NAPLES, FL 34108 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 CHAIRMAN  
Name HELMS, ALISA  
Address 170 OAK BEACH BLVD  
City-State-Zip: SEBRING FL 33875

Title OTHER  
Name GONSALVES, BILL  
Address 3319 TAMiami TRAIL EAST  
City-State-Zip: NAPLES FL 34112

Title OTHER  
Name BUDD, RUSSELL  
Address 5981 SHADY OAKS LANE  
City-State-Zip: NAPLES FL 34119

Title OTHER  
Name FRANCOEUR JR., PHILIP  
Address 700 21ST AVE SOUTH  
City-State-Zip: NAPLES FL 34102

Title SECRETARY  
Name DROBINSKI, GEORGE  
Address 2500 NORTH TAMiami TRAIL  
SUITE 210  
City-State-Zip: NAPLES FL 34103

Title OTHER  
Name LUCARELLI, DOMENIC  
Address 351 AIRPORT PULLING ROAD N  
City-State-Zip: NAPLES FL 34104

Title OTHER  
Name WEIDENHAMMER, LESLIE LYNN  
Address 3319 TAMiami TRAIL EAST  
BLDG. J-1  
City-State-Zip: NAPLES FL 34112

Title OTHER  
Name THOMAS, LINDY  
Address 1780 COMMERCIAL DRIVE  
City-State-Zip: NAPLES FL 34112

**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:** PAMELA BAKER**EXECUTIVE DIRECTOR****04/16/2018**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title	EXECUTIVE DIRECTOR
Name	BAKER, PAMELA
Address	20265 CORKSCREW SHORES BLVD.
City-State-Zip:	ESTERO FL 33928