## 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.

TREASURER

SIGNATURE: MICHAEL HARRIS

Electronic Signature of Signing Officer/Director Detail

#### 2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT DOCUMENT# N22000007020

Entity Name: COLLIER COUNTY HABITAT NEXTGEN INC.

### **Current Principal Place of Business:**

11145 TAMIAMI TRAIL E NAPLES. FL 34113

### **Current Mailing Address:**

11145 TAMIAMI TRAIL E NAPLES. FL 34113 US

### FEI Number: 88-2910931

### Name and Address of Current Registered Agent:

REGISTERED AGENTS INC. 7901 4TH ST N **STE 300** ST. PETERSBURG, FL 33702 US 8821774985CC

Certificate of Status Desired: No

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

### Officer/Director Detail :

Oncer/Director Detail :			
Title	P	Title	VP
Name	HOWELL, AUSTIN	Name	NAGY, SLOAN
Address	11145 TAMIAMI TRAIL E	Address	11145 TAMIAMI TRAIL E
City-State-Zip:	NAPLES FL 34113	City-State-Zip:	NAPLES FL 34113
Title	TR		
Name	HARRIS, MICHAEL		
Address	11145 TAMIAMI TRAIL E		
City-State-Zip:	NAPLES FL 34113		

04/16/2023

Date

Date

# FILED Apr 16, 2023 Secretary of State