



COLLIER COUNTY GOVERNMENT
GROWTH MANAGEMENT DEPARTMENT
www.colliergov.net

2800 NORTH HORSESHOE DRIVE
NAPLES, FLORIDA 34104
(239) 252-2400 FAX: (239) 252-6358

PROPERTY OWNERSHIP DISCLOSURE FORM

This is a required form with all land use petitions, except for Appeals and Zoning Verification Letters.

Should any changes of ownership or changes in contracts for purchase occur subsequent to the date of application, but prior to the date of the final public hearing, it is the responsibility of the applicant, or agent on his behalf, to submit a supplemental disclosure of interest form.

Please complete the following, use additional sheets if necessary.

- a. If the property is owned fee simple by an INDIVIDUAL, tenancy by the entirety, tenancy in common, or joint tenancy, list all parties with an ownership interest as well as the percentage of such interest:

Name and Address	% of Ownership

- b. If the property is owned by a CORPORATION, list the officers and stockholders and the percentage of stock owned by each:

Name and Address	% of Ownership
AMULT, LLC – Parcel No. 00138600000 & 00226240204	50
Ave Maria University Land Trust, Inc. (a Florida Not For Profit Corporation), 2600 Golden Gate Pkwy, #200 signs on behalf of AMULT, LLC	100
Collier County, C/O Real Property Management– Parcel No. 00138680101 & 22671200709 (a Florida Not For Profit Corporation) 3335 Tamiami Tr E, Suite 101	100

- c. If the property is in the name of a TRUSTEE, list the beneficiaries of the trust with the percentage of interest:

Name and Address	% of Ownership



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- d. If the property is in the name of a GENERAL or LIMITED PARTNERSHIP, list the name of the general and/or limited partners:

Name and Address	% of Ownership
Barron Collier Partnership, LLLP – Parcel No. 00138600000 & 00226240204	50
Barron Collier Management, LLC 1.0000%	
Juliet C. Sproul Family Inheritance Trust 24.7500%	
Barron G. Collier III Lifetime Irrevocable Trust 24.7500%	
Lamar Gable Lifetime Irrevocable Trust 12.3750%	
FGVLIRT – Christopher D. Villere Family 4.1250%	
FGVLIRT – Mathilde V. Currence Family 4.1250%	
FGVLIRT – Lamar G. Villere Family 4.1250%	
Phyllis G. Alden Lifetime Irrevocable Trust 12.3750%	
Donna G. Keller Lifetime Irrevocable Trust 12.3750%	
Ave Maria Development, LLLP – Parcel No. 00138602008	100
Barron Collier Corporation – see attached	50
NUA Baile, LLC	50
Thomas S. Monaghan, Manager	
Paul Roney, Manager	

- e. If there is a CONTRACT FOR PURCHASE, with an individual or individuals, a Corporation, Trustee, or a Partnership, list the names of the contract purchasers below, including the officers, stockholders, beneficiaries, or partners:

Name and Address	% of Ownership

Date of Contract: _____



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f. If any contingency clause or contract terms involve additional parties, list all individuals or officers, if a corporation, partnership, or trust:

g.

Name and Address

h. Date subject property acquired 2018, 2014, 2008 and 2004

☐ Leased: Term of lease _____ years /months

If, Petitioner has option to buy, indicate the following:

Date of option: _____

Date option terminates: _____, or

Anticipated closing date: _____

AFFIRM PROPERTY OWNERSHIP INFORMATION

Any petition required to have Property Ownership Disclosure, will not be accepted without this form. Requirements for petition types are located on the associated application form. Any change in ownership whether individually or with a Trustee, Company or other interest-holding party, must be disclosed to Collier County immediately if such change occurs prior to the petition's final publichearing.

As the authorized agent/applicant for this petition, I attest that all of the information indicated on this checklist is included in this submittal package. I understand that failure to include all necessary submittal information may result in the delay of processing this petition.

The completed application, all required submittal materials, and fees shall be submitted to:

Growth Management Department
ATTN: Business Center
2800 North Horseshoe Drive
Naples, FL 34104

Agent/Owner Signature

April 17, 2019

Date

D. Wayne Arnold, AICP

Agent/Owner Name (please print)

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000070655

Entity Name: BARRON COLLIER CORPORATION**Current Principal Place of Business:**2600 GOLDEN GATE PARKWAY
NAPLES, FL 34105-3227**Current Mailing Address:**2600 GOLDEN GATE PARKWAY
NAPLES, FL 34105-3227**FEI Number:** 20-0104023**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BOAZ, BRADLEY A
2600 GOLDEN GATE PARKWAY
NAPLES, FL 34105-3227 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 P/D
Name COLLIER, BARRON III
Address 2600 GOLDEN GATE PARKWAY
City-State-Zip: NAPLES FL 34105-3227

Title DIRECTOR
Name SPROUL, KATHERINE G
Address 2600 GOLDEN GATE PARKWAY
City-State-Zip: NAPLES FL 34105-3227

Title VP/D
Name GABLE, R. BLAKESLEE
Address 2600 GOLDEN GATE PARKWAY
City-State-Zip: NAPLES FL 34105-3227

Title VP
Name BAIRD, DOUGLAS E
Address 2600 GOLDEN GATE PARKWAY
City-State-Zip: NAPLES FL 34105

Title V/S/T/RA
Name BOAZ, BRADLEY A
Address 2600 GOLDEN GATE PARKWAY
City-State-Zip: NAPLES FL 34105

Title DIRECTOR
Name VILLERE, LAMAR G
Address 2600 GOLDEN GATE PARKWAY
City-State-Zip: NAPLES FL 34105-3227

Title DIRECTOR
Name ALDEN, PHYLLIS G
Address 2600 GOLDEN GATE PARKWAY
City-State-Zip: NAPLES FL 34105-3227

Title DIRECTOR
Name KUNDE, CHELSEA
Address 2600 GOLDEN GATE PARKWAY
City-State-Zip: NAPLES FL 34105-3227

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: BRADLEY A. BOAZ

V/S/T

04/23/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	VP
Name	GOGUEN, BRIAN
Address	2600 GOLDEN GATE PARKWAY
City-State-Zip:	NAPLES FL 34105-3227

2019 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000029860

Entity Name: AMULT, LLC

Current Principal Place of Business:

5050 AVE MARIA BLVD
AVE MARIA, FL 34142

Current Mailing Address:

5050 AVE MARIA BLVD
AVE MARIA, FL 34142

FEI Number: 20-0154974

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MUNIN, EUGENE L
5050 AVE MARIA BLVD
AVE MARIA, FL 34142 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: EUGENE L. MUNIN

04/17/2019

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name AVE MARIA UNIVERSITY LAND
TRUST, INC.
Address 5050 AVE MARIA BLVD
City-State-Zip: AVE MARIA FL 34142

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: EUGENE L. MUNIN

CFO

04/17/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date



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Detail by Entity Name

Florida Not For Profit Corporation
AVE MARIA UNIVERSITY LAND TRUST, INC.

Filing Information

Document Number	N03000006958
FEI/EIN Number	20-0154974
Date Filed	08/13/2003
State	FL
Status	ACTIVE
Last Event	REINSTATEMENT
Event Date Filed	07/25/2018

Principal Address

5050 AVE MARIA BLVD
AVE MARIA, FL 34142

Changed: 04/30/2008

Mailing Address

5050 AVE MARIA BLVD
AVE MARIA, FL 34142

Changed: 04/30/2008

Registered Agent Name & Address

Munin, Eugene L, CFO
5050 AVE MARIA BLVD
AVE MARIA, FL 34142

Name Changed: 07/25/2018

Address Changed: 01/24/2012

Officer/Director Detail

Name & Address

Title Treasurer

FORREST, III, GEORGE
24 FRANK LLOYD WRIGHT DR
ANN ARBOR, MI 48106

Title President

Farnham, Robert E
5050 AVE MARIA BLVD
AVE MARIA, FL 34142

Title Secretary

Grace, Dennis J
5050 AVE MARIA BLVD
AVE MARIA, FL 34142

Annual Reports

Report Year	Filed Date
2016	03/09/2016
2017	07/25/2018
2018	07/25/2018

Document Images

07/25/2018 -- REINSTATEMENT	View image in PDF format
03/09/2016 -- ANNUAL REPORT	View image in PDF format
07/24/2015 -- ANNUAL REPORT	View image in PDF format
02/06/2014 -- AMENDED ANNUAL REPORT	View image in PDF format
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10/13/2003 -- Amended and Restated Articles	View image in PDF format
08/13/2003 -- Domestic Non-Profit	View image in PDF format

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