## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Jan 29, 2007 08:00 AM Secretary of State

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1. Entity Name

COLONIAL OFFICE BUILDING, INC.



Principal Place of Business

Mailing Address

4367 NORTH FEDERAL HIGHWAY FT. LAUDERDALE, FL 33308 4367 NORTH FEDERAL HIGHWAY FT. LAUDERDALE, FL 33308



## DO NOT WRITE IN THIS SPACE

01032007 No Chg-NP

CR2E037 (4/06)

4. FEI Number 59-1740585

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

AURELIUS, JOHN E. 4367 NORTH FEDERAL HWY FORT LAUDERDALE, FL 33308

## DO NOT WRITE IN THIS SPACE

			IN THIS STAGE									
8. 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. I am familiar with, and accept the obligations of registered agent.												
SIGNATURE	Signature, typed or printed name of registered agent and bitle	e if applicable. (NOTE: Registered	Agent signature	required when rainstating}	DATE	DATE						
	Filing Fee is \$61.25 . Due by May 1, 2007	9. Election Campaign Financ Trust Fund Contribution.	cing 🔲	\$5.00 May Be Added to Fees	to he cape of	5						
10.	OFFICERS AND DIRE	CTORS		· · · · · · · · · · · · · · · · · · ·	<del></del>							
TITLE NAME STREET ADDRESS CITY-SI-ZIP	VD CASE, CY 724 MIDDLE RIVER DR FT. LAUDERDALE, FL 33304				000000607445 01/31/07-80038-	-UO6 61.25						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD AURELIUS, JOHN E. 2864 NE 24TH COURT FT. LAUDERDALE, FL 33305											
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE							
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE							
TATLE NAME STREET ADDRESS CITY-ST-ZIP						;						
TITLE NAME STREET ADDRESS												

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

GNATURE AND TYPED OR PRINCED NAME OF SIGNING OFFICER OR DIRECTOR

1.26.07 954771 3500

Daytima Phone