2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#761208

FILED Mar 03, 2005 Secretary of State

Entity Name: COLLIER BUILDING INDUSTRY ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 4779 ENTERPRISES AVENUE NAPLES, FL 34104 **Current Mailing Address: New Mailing Address:** 4779 ENTERPRISES AVENUE NAPLES, FL 34104 FEI Number: 59-1284455 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ELLIS, DAVID 4779 ENTERPRISES AVENUE NAPLES, FL 34104 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition ZICHELLA, AL Name: Name: 24301 WALDON CT DR. Address: Address: City-St-Zip: BONITA SPRINGS, FL 34134 City-St-Zip: Title: () Delete Title: () Change () Addition Name: WEDGE-LUDWIG, PATTY Name: Address: 4089 TAMIAMI TR. N #A-203 Address: City-St-Zip: NAPLES, FL 34103 City-St-Zip: Title: () Delete Title: () Change () Addition SPINELLI, BILL Name: Name: Address: 3927 ARNOLD AVENUE Address: City-St-Zip: NAPLES, FL 34104 City-St-Zip: Title: () Delete Title: () Change () Addition Name: VARIAN, WILLIAM Name: 1400 BLUEPOINT AVE, #1022 Address: Address: City-St-Zip: NAPLES, FL 34102 City-St-Zip: Title: () Delete Title: () Change () Addition ELLIS, DAVID Name: Name: 2465 TRADE CENTER WAY Address: Address: City-St-Zip: NAPLES, FL 34109 City-St-Zip: Title: () Delete Title: (X) Change () Addition HARRISON, MICHELE TIBSTRA, TREVOR Name: Name: Address: 4601 ENTERPRISES AVENUE Address: 15100 COLLIER BLVD. NAPLES, FL 34104 NAPLES, FL 34119 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DAVID ELLIS D 03/03/2005