

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 761208

FILED
Apr 13, 2009
Secretary of State

Entity Name: COLLIER BUILDING INDUSTRY ASSOCIATION, INC.

Current Principal Place of Business:

4779 ENTERPRISE AVENUE
NAPLES, FL 34104 US

New Principal Place of Business:

Current Mailing Address:

4779 ENTERPRISE AVENUE
NAPLES, FL 34104 US

New Mailing Address:

FEI Number: 59-1284455 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TALBERT, BRENDA
4779 ENTERPRISES AVENUE
NAPLES, FL 34104 US

Name and Address of New Registered Agent:

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:

Title: D () Delete
Name: DAVID, ALDRICH
Address: 2403 TRADE CENTER WAY #6
City-St-Zip: NAPLES, FL 34109 20

Title: D () Delete
Name: HARRISON, MICHELE
Address: 4779 ENTERPRISE AVE
City-St-Zip: NAPLES, FL 34104

Title: D () Delete
Name: MADDOX, JEFF
Address: 28016 WESTBROOK DRIVE
City-St-Zip: NAPLES, FL 34135

Title: D () Delete
Name: LYKOS, THOMAS
Address: 1989-B TRADE CENTER WAY
City-St-Zip: NAPLES, FL 34109

Title: D () Delete
Name: TALBERT, BRENDA
Address: 4779 ENTERPRISE AVE
City-St-Zip: NAPLES, FL 34104

Title: D () Delete
Name: HENNING, HEATHER
Address: 4344 CORPORATE SQUARE BLVD. #1
City-St-Zip: NAPLES, FL 34104

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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City-St-Zip:

Title: () Change () Addition
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City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: BRENDA TALBERT

EO

04/13/2009

Electronic Signature of Signing Officer or Director

_____ Date