

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 12, 2004 8:00 am
Secretary of State

04-12-2004 90030 009 ****50.00

DOCUMENT # M99000001853	
1. Entity Name COLLIERS SOUTH FLORIDA, LLC	

Principal Place of Business 6360 N.W. 5TH WAY, #300 FT. LAUDERDALE, FL 33309	Mailing Address 6360 N.W. 5TH WAY, #300 FT. LAUDERDALE, FL 33309
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2. Principal Place of Business Suite, Apt. #, etc. City & State Zip	3. Mailing Address LANARD PAXILBUND INC 399 MARKET ST PHILA, PA 19106
Country	Country

44033992



01152004 Chg-LLC CR2E083 (10/03)

4. FEI Number 65-0965066	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324
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7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$50.00
Due by May 1, 2004**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS / MANAGERS		10. ADDITIONS / CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR DOUGLAS SAYER 399 MARKET STREET PHILADELPHIA, PA 19106 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

4-6-04 215-928-7895



Attachment
Division of Corporations

2004 Annual Report

24039992
#M99000001853

Listed below is the most recent information reported for the entity.
Please review and click the appropriate button at the bottom to generate the annual report form.

This information cannot be changed on the report.	
Document Number	M99000001853
Business Entity Name	COLLIERS SOUTH FLORIDA, LLC
Original File Date	11/24/1999

FEI Number 65-0965066

Principal Address 6360 N.W. 5TH WAY, #300
FT. LAUDERDALE, FL 33309Mailing Address 6360 N.W. 5TH WAY, #300 *% LAWARD & AXIL BOWEN, Inc.*
FT. LAUDERDALE, FL 33309 *399 MARKET STREET*
*PHILADELPHIA, PA 19106*Registered Agent C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US**Managing Member/Manager Name And Address**MGR
DOUGLAS SAYER
399 MARKET STREET
PHILADELPHIA, PA 19106

If all of the above information is correct and
you do not wish to make any changes, please
select:

If you need to make changes to the
above information, please select:

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