


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 09, 2004 8:00 am
Secretary of State

07-09-2004 90010 010 ***550.00

DOCUMENT # P12314

1. Entity Name
COLLAT, INC.



Principal Place of Business
**1900 CRESTWOOD BOULEVARD.
 BIRMINGHAM, AL 35210**

Mailing Address
**1900 CRESTWOOD BOULEVARD.
 ATTN: LICENSING
 BIRMINGHAM, AL 35210 US**

54061191

2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State
 City & State

Zip Country
 Zip Country



06302004 Chg-P CR2E034 (10/03)

6. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
 1200 S. PINE ISLAND ROAD
 PLANTATION, FL 33324**

4. FEI Number
63-0925198

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$550.00
 Due by September 8, 2004**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD RATLIFF, W.T., JR. <input type="checkbox"/> Delete 1900 CRESTWOOD BLVD. BIRMINGHAM, AL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD <input checked="" type="checkbox"/> Delete RATLIFF, J.K.V. 1900 CRESTWOOD BLVD. BIRMINGHAM, AL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S <input checked="" type="checkbox"/> Delete HOWE, HOPE 1900 CRESTWOOD BOULEVARD. BIRMINGHAM, AL 35210
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V <input type="checkbox"/> Delete COUCH, ROBERT M 1900 CRESTWOOD BLVD. BIRMINGHAM, AL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD <input type="checkbox"/> Delete RATLIFF, WM. T., III 1900 CRESTWOOD BLVD. BIRMINGHAM, AL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SRVP <input type="checkbox"/> Delete STONE, CHERYL R 1900 CHESTWOOD BIRMINGHAM, AL 35242

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Francelia L. Owen 1900 Crestwood Blvd Birmingham AL 35210
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 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 607, 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: *Cheryl R. Stone* **Cheryl R. Stone, SRVP 6/30/04 205-951-4423**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #