

**FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00**

**FILED**  
**May 04 1998 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 271801 (3)**  
 1. Corporation Name  
**COLLIER LAND AND CATTLE CORPORATION**



Principal Place of Business <b>3003 N TAMiami TRAIL NAPLES FL 33940</b>	Mailing Address <b>3003 N TAMiami TRAIL NAPLES FL 33940</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>07/12/1963</b>	
21	22	26	27	4. FEI Number <b>59-1030307</b>	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
23	24	25	28	7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
Zip <b>34103</b>	Country	Zip <b>34103</b>	Country		

8. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
<b>FLORA, TERRY L</b> <b>3003 N TAMiami TRAIL</b> <b>NAPLES FL 33940</b>				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	FL	85

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

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

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	VD	<input type="checkbox"/> DELETE		1.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	FLOOD, THOMAS J			1.2 NAME			
STREET ADDRESS	3003 TAMiami TRAIL NORTH			1.3 STREET ADDRESS			
CITY-ST-ZIP	NAPLES FL 33940			1.4 CITY-ST-ZIP			
TITLE	PO	<input type="checkbox"/> DELETE		2.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	COLLIER, MILES C			2.2 NAME			
STREET ADDRESS	3003 NORTH TAMiami TRAIL			2.3 STREET ADDRESS			
CITY-ST-ZIP	NAPLES, FL 00000			2.4 CITY-ST-ZIP			
TITLE	D	<input type="checkbox"/> DELETE		3.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	COLLIER, BARRON G. II			3.2 NAME			
STREET ADDRESS	3003 NORTH TAMiami TRAIL			3.3 STREET ADDRESS			
CITY-ST-ZIP	NAPLES, FL 00000			3.4 CITY-ST-ZIP			
TITLE	V	<input type="checkbox"/> DELETE		4.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	TAYLOR, MICHAEL O			4.2 NAME			
STREET ADDRESS	3003 N. TAMiami TRAIL			4.3 STREET ADDRESS			
CITY-ST-ZIP	NAPLES FL			4.4 CITY-ST-ZIP			
TITLE	VS	<input type="checkbox"/> DELETE		5.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	FLORA, TERRY L			5.2 NAME			
STREET ADDRESS	3003 N. TAMiami TRAIL			5.3 STREET ADDRESS			
CITY-ST-ZIP	NAPLES FL			5.4 CITY-ST-ZIP			
TITLE	V	<input type="checkbox"/> DELETE		6.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	MASON, CHARLES H			6.2 NAME			
STREET ADDRESS	3003 N. TAMiami TRAIL			6.3 STREET ADDRESS			
CITY-ST-ZIP	NAPLES FL			6.4 CITY-ST-ZIP			

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
 Terry L. Flora, Vice President 03/10/08 041761-4455

CR2E034 (10/97)

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DOCUMENT #: 271801

CORPORATION NAME: COLLIER LAND AND CATTLE CORPORATION

ADDITIONS TO OFFICERS AND DIRECTORS

TITLE:	AT
NAME:	KURTYKA, DEBORAH L.
STREET ADDRESS:	3003 TAMIAMI TRAIL NORTH
CITY-ST-ZIP:	NAPLES FL 34103