

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F88633

**Entity Name:** COLLIERS ARNOLD, INC.

**Current Principal Place of Business:**

311 PARK PLACE BLVD  
SUITE 600  
CLEARWATER, FL 33759

**Current Mailing Address:**

311 PARK PLACE BLVD  
SUITE 600  
CLEARWATER, FL 33759

**FEI Number:** 59-2199808

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

ARNOLD, LEE E JR.  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 US

*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:** LEE E. ARNOLD JR.

04/26/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title: CEO  
Name: ARNOLD, LEE E JR.  
Address: 311 PARK PLACE BVLVD., SUITE 600  
City-State-Zip: CLEARWATER FL 33759

Title: PRESIDENT  
Name: KRATZ, RYAN D  
Address: 311 PARK PLACE BLVD., SUITE 600  
City-State-Zip: CLEARWATER FL 33759

Title: SENIOR VICE PRESIDENT  
Name: SCOTT, JOHN K.  
Address: 311 PARK PLACE BLVD  
SUITE 600  
City-State-Zip: CLEARWATER FL 33759

Title: DIRECT  
Name: ROBINSON, CRAIG  
Address: 666 FIFTH AVENUE  
City-State-Zip: NEW YORK NY 10103

Title: DIRECTOR  
Name: SPIEGEL, DANIEL L  
Address: 6250 N. RIVER RD, STE 11-100  
City-State-Zip: ROSEMONT IL 60018

Title: DIRECTOR  
Name: HARBERT, JOSEPH  
Address: 666 FIFTH AVENUE, 4TH FLOOR  
City-State-Zip: NEW YORK NY 10103

*I hereby 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** RYAN D KRATZ

PRESIDENT

04/26/2016

Electronic Signature of Signing Officer/Director Detail

Date