#### 2025 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M14000008487

Entity Name: COLLIERS INTERNATIONAL FLORIDA, LLC

**FILED** Apr 11, 2025 **Secretary of State** 2973224609CC

## **Current Principal Place of Business:**

200 E BROWARD BLVD, STE 120 FORT LAUDERDALE. FL 33301

## **Current Mailing Address:**

200 E BROWARD BLVD, STE 120 FORT LAUDERDALE. FL 33301 US

FEI Number: 47-2360077 Certificate of Status Desired: No

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

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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:

City-State-Zip:

Electronic Signature of Registered Agent

Date

## Authorized Person(s) Detail :

Title	TREASURER	Title	MANAGER
Name	HEMMING, ROBERT	Name	BOROK, GIL

Address 1066 W HASTINGS ST #2300 Address 6324 CANOGA AVE SUITE 100 WOODLAND HILLS CA 91367 City-State-Zip: City-State-Zip: VANCOUVER BC V6E 3X2

Title SECRETARY, MGR Title ASSISTANT SECRETARY Name HAWKINS, MATTHEW SCHWAB IV, GEORGE L. Name

Address 1140 BAY STREET, STE 4000 Address 1114 SIXTH AVENUE

TORONTO M5S 2Z4 City-State-Zip: City-State-Zip: NEW YORK NY 10036

Title VΡ **BROKER OF RECORD** Title

Name SIEGEL, MATTHEW Name WEISER, WARREN P. M.

Address ONE URBAN CENTRE 4830 WEST Address 801 BRICKELL AVE, SUITE 900

KENNEDY BLVD. MIAMI FL 33131

**STE 300** 

City-State-Zip: TAMPA FL 33609 Title

RODRIGUEZ, STENPHANIE Title MANAGING DIRECTOR, BROKER OF Name

**RECORD** 

Address 801 BRICKELL AVE Name EVANS, ALEXANDER

MIAMI FL 33131 City-State-Zip: 255 S ORANGE AVE Address

STE 1300

ORLANDO FL 32801 City-State-Zip:

# Continues on page 2

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

04/11/2025 SIGNATURE: MATTHEW HAWKINS MANAGER

Electronic Signature of Signing Authorized Person(s) Detail

Date

# **Authorized Person(s) Detail Continued:**

Title MANAGING DIRECTOR
Name BALLARD, DUSTIN

Address 200 E BROWARD BLVD, STE 120 City-State-Zip: FORT LAUDERDALE FL 33301