2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT #397066

COLLIER CUSTOM BUILDERS, INC.



Principal Place of Business

6455 AIRPORT RD., NORTH NAPLES, FL 34109

Mailing Address

6455 AIRPORT RD., NORTH NAPLES, FL 34109 US

FILED Apr 23, 2007 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

CR2E034 (11/05) 01112007 No Chg-P 4. FEI Number Applied For 59-1512975 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable

ROESER, CARL J. 6455 AIRPORT RD., NORTH NAPLES, FL 34109

SIGNATURE

DO NOT WRITE IN THIS SPACE

8.	The above named entity submits this statement for the purpose of changing its registere	ed office or registered agent, or both,	in the State of Florida	I am familiar with, and accept
	the obligations of registered agent.			

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

U00000726617 05/04/07-80014-012 150.00

OFFICERS AND DIRECTORS 10. PD TITLE NAME ROESER, CARL J. STREET ADDRESS 101 SEAGATE DRIVE CITY-ST-ZIP NAPLES, FL 34103 TD TITLE FRED, POLAND NAME STREET ADDRESS 4171 PENSACOLA AVE CITY-ST-ZIP ESTRO, FL 33942 SD TITLE ROESER, SUSAN M. NAME STREET ADDRESS 1307 PYXIEMOSS LN NAPLES, FL 34105 CITY-ST-7IP VD TITLE ROESER, ALAN 2484 10TH STREET, NORTH STREET ADDRESS CITY-ST-ZIP NAPLES, FL 34102 ROESER, PETER NAME STREET ADDRESS 626 FOUNTAINHEAD LANE CITY-ST-ZIP NAPLES, FL 34103 TITLE NAME STREET ADDRESS CITY-SI-7/P

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SUSAN MI ROESER