2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 397066

Address:

City-St-Zip:

626 FOUNTAINHEAD LANE

NAPLES, FL 34103

Entity Name: COLLIER CUSTOM BUILDERS, INC.

FILED Feb 24, 2009 Secretary of State

Littly Nai	ille. Collier	COSTON BOILDERS, INC.					
Current P	rincipal Place	of Business:	New Princ	New Principal Place of Business:			
6455 AIRP NAPLES, I	PORT RD., NO FL 34109	RTH					
Current M	lailing Addres	ss:	New Maili	New Mailing Address:			
6455 AIRPORT RD., NORTH NAPLES, FL 34109 US				6455 AIRPORT RD., NORTH NAPLES, FL 34109			
FEI Number:	: 59-1512975	FEI Number Applied For ()	FEI Number Not App	licable ()	Certificate of Status Desired ()	
Name and	Address of C	Current Registered Agent:	Name and	Address of	New Registered Agent:		
ROESER, 6455 AIRP NAPLES, I	PORT RD., NO	RTH IS					
	named entity e of Florida.	submits this statement for the p	ourpose of changing i	ts registered	office or registered agent, or	both,	
SIGNATUR							
	Electror	nic Signature of Registered Age	ent		Date		
Election Car	mpaign Financin	g Trust Fund Contribution ().					
OFFICER	S AND DIREC	TORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PD (ROESER, CAR 101 SEAGATE NAPLES, FL 3	DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	TD (FRED, POLANI 4171 PENSACO ESTRO, FL 33	DLA AVE	Title: Name: Address: City-St-Zip:	TD () FRED, POLAN 4171 PENSAC ESTRO, FL 3	COLA AVE		
Title: Name: Address: City-St-Zip:	SD (ROESER, SUS 1307 PYXIEMO NAPLES, FL 3	DSS LN	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	VD (ROESER, ALAI 2484 10TH STE NAPLES, FL 3	REET, NORTH	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name:	VD () ROESER, PET) Delete ER	Title: Name:	() Change () Addition		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: SUSAN M. ROESER SD 02/24/2009