

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 453434

Entity Name: COLLEY CORP.

FILED
Apr 12, 2007
Secretary of State

Current Principal Place of Business:

414 MARY AVENUE
P.O. BOX 1530
NEW SMYRNA BEACH, FL 32170

New Principal Place of Business:

414 MARY AVENUE
NEW SMYRNA BEACH, FL 32168

Current Mailing Address:

414 MARY AVENUE
P.O. BOX 1530
NEW SMYRNA BEACH, FL 321701530 US

New Mailing Address:

P.O. BOX 1530
NEW SMYRNA BEACH, FL 32170 US

FEI Number: 59-1537762

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KENNEDY, DOYLE
414 MARY AVENUE
P.O. BOX 1530
NEW SMYRNA BCH., FL 32170 US

Name and Address of New Registered Agent:

KENNEDY, DOYLE
414 MARY AVENUE
NEW SMYRNA BCH., FL 32168 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:

04/12/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KENNEDY, DOYLE,
Address: 414 MARY AVE.
City-St-Zip: NEW SMYRNA BEACH, FL

Title: S () Delete
Name: KENNEDY, DOYLE,
Address: 414 MARY AVE.
City-St-Zip: NEW SMYRNA BEACH, FL

Title: V () Delete
Name: KENNEDY, CATHERINE A.,
Address: 414 MARY AVE.
City-St-Zip: NEW SMYRNA BCH.FL.,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: CATHERINE A. KENNEDY

V

04/12/2007

Electronic Signature of Signing Officer or Director

Date