2007 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Feb 09, 2007 08:00 A Secretary of State **DOCUMENT # 562897** 1. Entity Name **COLLINS LAND COMPANY** Principal Place of Business Maiting Address 3297 NE CATAMARAN TERR 3297 NE CATAMARAN TERR JENSEN BCH, FL 34957 US JENSEN BCH, FL 34957 US 02052007 CR2E034 (11/05) No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number Not Applicable 59-1803732 \$8.75 Additional 5. Certificate of Status Desired Fee Required y 18, 1875 y 24 a makarajaran sa anaka ka 18 Ganaran anaka makaran kanakaran ka anaka ka 18 5. Name and Address of Current Registered Agent COLLINS, NEIL A. DO NOT WRITE 3297 NE CATAMARAN TERR JENSEN BCH, FL 34957 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS TILE PD NAME COLLINS, NEIL A. STREET ADDRESS 3297 NE CATAMARAN TERR CITY-ST-ZIP JENSEN BCH, FL 34957 UNDOGO630521 02/20/07/80000-019 150. VTSD TITLE HAME COLLINS, THELMA M. STREET ADDRESS 3297 NE CATAMARAN TERR CITY-ST-ZIP JENSEN BCH, FL 34957 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIF TITLE NAME STREET ADDRESS CITY-ST-ZIP 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 frestee 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.

FILED