

# **2012 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A19949

**FILED**  
**Jan 09, 2012**  
**Secretary of State**

**Entity Name:** THE COLLIER FUND, LTD.

**Current Principal Place of Business:**

C/O PRIVATE CAPITAL MANAGEMENT, L.P.  
8889 PELICAN BAY BLVD., SUITE 500  
NAPLES, FL 34108

**New Principal Place of Business:**

**Current Mailing Address:**

C/O PRIVATE CAPITAL MANAGEMENT, L.P.  
8889 PELICAN BAY BLVD., SUITE 500  
NAPLES, FL 34108

**New Mailing Address:**

**FEI Number:** 59-2541674

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ATKINS, CHAD  
8889 PELICAN BAY BLVD. SUITE 500  
NAPLES, FL 34108 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**GENERAL PARTNER INFORMATION:**

Document #: B01000000010  
Name: PRIVATE CAPITAL MANAGEMENT, L.P.  
Address: 8889 PELICAN BAY BLVD., SUITE 500  
City-St-Zip: NAPLES, FL 341087512

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

I hereby certify that the information indicated on this 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 General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: CHAD ATKINS

P

01/09/2012

\_\_\_\_\_  
Electronic Signature of Signing General Partner

\_\_\_\_\_  
Date