
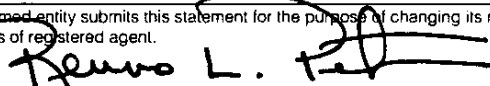
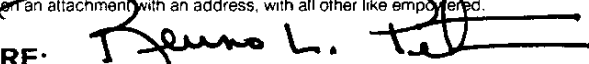


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2008 8:00 am
Secretary of State

04-09-2008 90031 048 ***150.00

DOCUMENT # F01000000778 1. Entity Name THE COLLABORATIVE INCORPORATED					
Principal Place of Business 1204 HARVARD ROAD GROSSE POINTE PARK, MI 48230			Mailing Address 1204 HARVARD ROAD GROSSE POINTE PARK, MI 48230		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 38-3559831	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent PETERSON, RENNO L 1605 MAIN STREET STE 700 SARASOTA, FL 34236				7. Name and Address of New Registered Agent Name RENNO L. PETERSON Street Address (P.O. Box Number is Not Acceptable) 1605 MAIN STREET STE. 900 City SARASOTA FL Zip Code 34236	
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. <div style="display: flex; justify-content: space-between;"> <div style="width: 40%;"> SIGNATURE:  <small>Signature, typed or printed name of registered agent and title if applicable</small> </div> <div style="width: 40%; text-align: right;"> 4/7/08 <small>DATE</small> </div> </div>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CV ESPERTI, ROBERT A 3561 EAST SUNRISE DRIVE TUCSON, AZ 85718	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PVT PETERSON, RENNO L 1605 MAIN STREET STE 700 SARASOTA, FL 34236	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S CAHOONE, DAVID K 1605 MAIN STREET STE 700 SARASOTA, FL 34236	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CV ESPERTI, ROBERT A 7288 CLAUD CANYON PLANE TUCSON, AZ 85718	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PVT PETERSON, RENNO L 1605 MAIN STREET, STE. 900 SARASOTA, FL 34236	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S CAHOONE, DAVID K. 1605 MAIN STREET, STE. 900 SARASOTA, FL 34236	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CV ESPERTI, ROBERT A 7288 CLAUD CANYON PLANE TUCSON, AZ 85718	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PVT PETERSON, RENNO L 1605 MAIN STREET, STE. 900 SARASOTA, FL 34236	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S CAHOONE, DAVID K. 1605 MAIN STREET, STE. 900 SARASOTA, FL 34236	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
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:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			4/7/08 941-365-4819 <small>Date Daytime Phone #</small>		