

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000004044

FILED  
Apr 23, 2008  
Secretary of State

Entity Name: THE COLLIER ORGANIZATION, INC.

## Current Principal Place of Business:

135 TRIAD WEST DR  
O'FALLEN, MO 63366

## New Principal Place of Business:

135 TRIAD WEST DR  
O'FALLON, MO 63366

## Current Mailing Address:

135 TRIAD WEST DR  
O'FALLEN, MO 63366

## New Mailing Address:

135 TRIAD WEST DR  
O'FALLON, MO 63366

FEI Number: 43-1741664

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CPT ( ) Delete  
Name: COLLIER, DONALD G JR  
Address: 135 TRIAD WEST DR  
City-St-Zip: O'FALLEN, MO 63366

Title: VCVP ( ) Delete  
Name: COLLIER, CYNTHIA L  
Address: 135 TRIAD WEST DR  
City-St-Zip: O'FALLEN, MO 63366

Title: S ( ) Delete  
Name: COLLIER, CYNTHIA L  
Address: 135 TRIAD WEST DR  
City-St-Zip: O'FALLEN, MO 63366

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CPT (X) Change ( ) Addition  
Name: COLLIER, DONALD G JR  
Address: 135 TRIAD WEST DR  
City-St-Zip: O'FALLON, MO 63366

Title: VCVP (X) Change ( ) Addition  
Name: COLLIER, CYNTHIA L  
Address: 135 TRIAD WEST DR  
City-St-Zip: O'FALLON, MO 63366

Title: S (X) Change ( ) Addition  
Name: COLLIER, CYNTHIA L  
Address: 135 TRIAD WEST DR  
City-St-Zip: O'FALLON, MO 63366

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.

SIGNATURE: DONALD COLLIER, JR.

CPT

04/23/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date