


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 23, 2004 08:00 AM
Secretary of State

DOCUMENT # F99000006018 1. Entity Name COLLECTOR WELLS INTERNATIONAL, INC.	
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Principal Place of Business 6360 HUNTLEY RD. COLUMBUS, OH 43229	Mailing Address 6360 HUNTLEY RD. COLUMBUS, OH 43229
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DO NOT WRITE IN THIS SPACE



01052004 No Chg-P CR2E034 (10/03)


4. FEI Number 31-1590620	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

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

**DO NOT WRITE
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  (NOTE: Registered Agent signature required when reinstating)

20 Jan '04

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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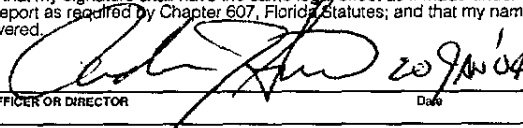
10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD SHEA, MICHAEL J 6425 STATE ROUTE 656 CENTERBURG, OH 43011
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD NILGES, MARK W 7710 SEDDON DRIVE DUBLIN, OH 43016
TITLE NAME STREET ADDRESS CITY - ST - ZIP	STD SMITH, ANDREW J 54 CHATHAM COLUMBUS, OH 43214
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD FRENCH, JAMES A 1383 CREEKSIDE PLACE REYNOLDSBURG, OH 43068
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V STOWE, SAM 308 WHISPERING PINES COURT WORTHINGTON, OH 43085
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD HUNT, HENRY 3719 PAMELA DRIVE GAHANNA, OH 43230

000000010875
01/23/04-80015-003 158.75

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

A.J. Smith, Sec/Treas

SIGNATURE:  20 Jan '04 1-19-04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #
614.888.9208