

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J45993 (9)

1. Corporation Name
COLLIER TEC, INC.



Principal Place of Business

**3003 TAMiami TRAIL NORTH
NAPLES FL 33940**

Mailing Address

**3003 TAMiami TRAIL NORTH
NAPLES FL 33940**

3. Date Incorporated or Qualified
11/26/1986

3a. Date of Last Report
04/24/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number
59-2758237

Applied For
Not Applicable

22

27

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

23

28

6. Election Campaign Financing
Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

24

29

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**FLORA, TERRY L
3003 TAMiami TRAIL NORTH
NAPLE FL 33940**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and filer of application

(NOTE: Registered Agent Signature required when renewing)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
**DP
COLLIER, MILES C.
3003 TAMiami TRAIL NORTH
NAPLES FL** ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
**VD
MERCER, JAMES A
3003 TAMiami TRAIL NORTH
NAPLES FL** ☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
**VS
FLORA, TERRY L
3003 TAMiami TRAIL NORTH
NAPLES FL** ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
**VD
FLOOD, THOMAS J
3003 TAMiami TRAIL NORTH
NAPLES FL 33940** ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
**T
BACEK, DAVE
3003 TAMiami TRAIL
NAPLES FL** ☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition
12 NAME
13 STREET ADDRESS
14 CITY- ST- ZIP

21 TITLE ☐ Change ☒ Addition
22 NAME
23 STREET ADDRESS
24 CITY- ST- ZIP
**V
Michael O. Taylor
3003 Tamiami Trail North
Naples, FL 33940**

31 TITLE ☐ Change ☐ Addition
32 NAME
33 STREET ADDRESS
34 CITY- ST- ZIP

41 TITLE ☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY- ST- ZIP

51 TITLE ☐ Change ☒ Addition
52 NAME
53 STREET ADDRESS
54 CITY- ST- ZIP
**T
Robert D. Corina
3003 Tamiami Trail North
Naples, FL 33940**

61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 CITY- ST- ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Terry L. Flora
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/96

Date

Signature Printed Name

CR2E034 (12/95)