## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# K00347

Name:

Address:

City-St-Zip:

JENNIFER L HOWARD,

11921 W 76TH DRIVE

ARVADA, CO 80005

Entity Name: COLLECTIONS UNLIMITED INC

FILED Jan 21, 2009 Secretary of State

		110110	OTTENNITED, IITO.			
Current Principal Place of Business:				New Principal P	New Principal Place of Business:	
206 NE 3R CRYSTAL	D ST RIVER, FL 34	4223	US			
Current Mailing Address:				New Mailing Address:		
P.O. BOX OCRYSTAL	1236 RIVER, FL 34	4423123	36 US			
FEI Number:	59-2887730	FEI N	umber Applied For()	FEI Number Not Applicable (	) Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:				Name and Addre	Name and Address of New Registered Agent:	
CRYSTAL  The above in the State	TH STREET RIVER, FL 34 named entity of Florida.		US this statement for the p	ourpose of changing its regis	stered office or registered agent, or both,	
SIGNATURE: Electronic Signature of Registered Agent				ent	 Date	
Election Can		_	Fund Contribution ( ).			
OFFICERS AND DIRECTORS:				ADDITIONS/CHA	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	V ( HECKMAN, ED 1180 N COUNT CRYSTAL RIVI	TRY CLUE		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	PSD ( JO ANN SMITH 1180 N COUNT CRYSTAL RIVI	TRY CLUE	B DR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	т (	) Delete		Title <sup>.</sup>	( ) Change ( ) Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: JENNIFER HOWARD T 01/21/2009