FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 APR 28 PM 1:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # K81235 (9)

1. Corporation Name

COLLIER CULVERTS, INC.

Principal Place of Business	Mailing Address
1820 40TH TERR SW NAPLES FL 33999	1820 40TH TERR SW NAPLES FL 33999

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/14/1989
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business
21 8329 - County Rd. 951
Suite, Apt. #, etc. 22
City & State 23 Naples Fla.
Zip 24 33999 Country 25 USA

2a. Mailing Address
26 8329 - County Rd. 951
Suite, Apt. #, etc. 27
City & State 28 Naples, Fla.
Zip 29 33999 Country 30 USA

4. FEI Number: 65-0115721 ☐ Applied For ☐ Not Applicable

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

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

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

9. Name and Address of Current Registered Agent

SCHMAELING, GEORGE A.
2901 44 TERR SW
NAPLES FL 33999

10. Name and Address of New Registered Agent

81 Name: Debbie Rodgers
82 Street Address (P.O. Box Number is Not Acceptable): 5254 - 19th Ave SW
83
84 City: Naples FL 85 Zip Code: 33999

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: Debbie Rodgers — Debbie Rodgers — 4-21-95
(Signature, name or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature is required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	11 TITLE	☐ Change ☐ Addition
NAME	RODGERS, DEBBIE A.	12 NAME	
STREET ADDRESS	5254 - 19TH AVE. S.W.	13 STREET ADDRESS	
CITY ST ZIP	NAPLES FL	14 CITY ST ZIP	
TITLE	STD	21 TITLE	☐ Change ☐ Addition
NAME	SCHMAELING, BETTY JEAN	22 NAME	
STREET ADDRESS	2091 44 TERR SW	23 STREET ADDRESS	
CITY ST ZIP	NAPLES FL	24 CITY ST ZIP	
TITLE	VD	31 TITLE	☐ Change ☐ Addition
NAME	RODGERS, DEBBIE A.	32 NAME	
STREET ADDRESS	5254 19 AVE SW	33 STREET ADDRESS	
CITY ST ZIP	NAPLES FL	34 CITY ST ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY ST ZIP		44 CITY ST ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		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 119.07(3)(i), 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: Debbie Rodgers — 4-21-95 — (813) 353-4800
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone

Debbie Rodgers

0332348 CP