

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K93906

FILED  
Apr 27, 2012  
Secretary of State

**Entity Name:** NOBLES-COLLIER, INC.

**Current Principal Place of Business:**

212 JEROME ST  
IMMOKALEE, FL 34142 US

**New Principal Place of Business:**

**Current Mailing Address:**

2600 GOLDEN GATE PARKWAY  
NAPLES, FL 34105 US

**New Mailing Address:**

**FEI Number:** 65-0127062

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BOAZ, BRADLEY A  
2600 GOLDEN GATE PARKWAY  
NAPLES, FL 34105 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

**OFFICERS AND DIRECTORS:**

Title: C/D  
Name: COLLIER, BARRON III  
Address: 2600 GOLDEN GATE PARKWAY  
City-St-Zip: NAPLES, FL 34105

Title: P/D  
Name: SPROUL, KATHERINE G  
Address: 2600 GOLDEN GATE PARKWAY  
City-St-Zip: NAPLES, FL 34105

Title: T  
Name: BOAZ, BRADLEY A  
Address: 2600 GOLDEN GATE PARKWAY  
City-St-Zip: NAPLES, FL 34105

Title: SD  
Name: NEWSOME, ROBERT W  
Address: 2600 GOLDEN GATE PARKWAY  
City-St-Zip: NAPLES, FL 34105

Title: D  
Name: NOBLES, LEWIS J III  
Address: 212 JEROME STREET  
City-St-Zip: IMMOKALEE, FL 34142

Title: D  
Name: MURRAH, DAVID  
Address: 212 JEROME ST  
City-St-Zip: IMMOKALEE, FL 34142

I hereby 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 all other like empowered.

SIGNATURE: BRADLEY A BOAZ

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04/27/2012

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

\_\_\_\_\_  
Date