

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000006281

FILED
Apr 24, 2006
Secretary of State

Entity Name: COLLIER INSURANCE AGENCY, LLC

Current Principal Place of Business:

2600 GOLDEN GATE PKWY.
NAPLES, FL 34105

New Principal Place of Business:

2600 GOLDEN GATE PARKWAY
NAPLES, FL 34105

Current Mailing Address:

2600 GOLDEN GATE PKWY
NAPLES, FL 34105

New Mailing Address:

2600 GOLDEN GATE PARKWAY
NAPLES, FL 34105

FEI Number: 59-3716717

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARINELLI, PAUL J
2600 GOLDEN GATE PKWY.
NAPLES, FL 34105 US

Name and Address of New Registered Agent:

MARINELLI, PAUL J
2600 GOLDEN GATE PARKWAY
NAPLES, FL 34105 US

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:

04/24/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: BAIRD, DOUGLAS E
Address: 2600 GOLDEN GATE PKWY
City-St-Zip: NAPLES, FL 34105

Title: MGR () Delete
Name: MARINELLI, PAUL J
Address: 2600 GOLDEN GATE PKWY
City-St-Zip: NAPLES, FL 34105

Title: MGR () Delete
Name: BOAZ, BRADLEY A
Address: 2600 GOLDEN GATE PKWY
City-St-Zip: NAPLES, FL 34105

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: BAIRD, DOUGLAS E
Address: 2600 GOLDEN GATE PARKWAY
City-St-Zip: NAPLES, FL 34105

Title: MGR (X) Change () Addition
Name: MARINELLI, PAUL J
Address: 2600 GOLDEN GATE PARKWAY
City-St-Zip: NAPLES, FL 34105

Title: MGR (X) Change () Addition
Name: BOAZ, BRADLEY A
Address: 2600 GOLDEN GATE PARKWAY
City-St-Zip: NAPLES, FL 34105

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: PAUL J MARINELLI

RA

04/24/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date