

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000056439

FILED
Feb 15, 2005
Secretary of State

Entity Name: COLLIER & SCALESE, P.L.

Current Principal Place of Business:

499 N.W. 70TH AVENUE
#106
PLANTATION, FL 33317 US

New Principal Place of Business:

Current Mailing Address:

499 N.W. 70TH AVENUE
#106
PLANTATION, FL 33317 US

New Mailing Address:

FEI Number: 45-0534452 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLLIER, ROBERT E II
499 N.W. 70TH AVENUE
#106
PLANTATION, FL 33317 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

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: ROBERT E. COLLIER, I, I, P.A.
Address: 499 N.W. 70TH AVENUE, #106
City-St-Zip: PLANTATION, FL 33317 US

Title: MGRM () Delete
Name: ANTHONY V. SCALESE,, P.A.
Address: 499 N.W. 70TH AVENUE, #106
City-St-Zip: PLANTATION, FL 33317 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ROBERT E. COLLIER, II

MGRM

02/15/2005

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