2007 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

DOCUMENT # L04000053682 COLLIER SEAWALL & DOCK, LLC



FILED Mar 29, 2007 08:00 A **Secretary of State**

Principal Place of Business_

Mailing Address

217 N COLLIER BLVD, #103 MARCO ISLAND, FL 34145

217 N COLLIER BLVD, #103 MARCO ISLAND, FL 34145



03102007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 43-2056029

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

MINCK, LINDA R ESQ.

NOT WOITE

PORTER WRIGHT MORRIS & ARTHUR LLP 5801 PELICAN BAY BLVD., STE. 300 NAPLES, FL 34108-7		IN THIS SPACE
	named entity submits this statement for the purpose of chains of registered agent.	anging its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and site if applicable.	(NOTE. Registered Agent signature required when reinstating) DATE
Fi	iling Fee is \$50.00 ue by May 1, 2007	
9.	MANAĞING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CARMIGNANI, A. BROOKS 785 DOVE COURT _ MARCO ISLAND, FL 34145	1/00000682242
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	7.	DO NOT WRITE
TITLE HAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
NAME STREET ADDRESS		

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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.

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE