

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000109170

FILED
May 22, 2007
Secretary of State

Entity Name: COLLIER, WILSON & MILLS, LLC

Current Principal Place of Business:

4934 PELICAN MANOR
COCONUT CREEK, FL 33073

New Principal Place of Business:

1112 WESTON RD #287
WESTON, FL 33326

Current Mailing Address:

101 NE 3RD AVE STE 1500
FT LAUDERDALE, FL 33301

New Mailing Address:

1112 WESTON RD #287
WESTON, FL 33326

FEI Number: 20-3761666 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

CORPORATE CREATIONS NETWORK INC.
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410 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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

Title: MGR () Delete
Name: MILLS, SARA N
Address: 4934 PELICAN MANOR
City-St-Zip: COCONUT CREEK, FL 33073

Title: MGR (X) Change () Addition
Name: MILLS, SARA N
Address: 1112 WESTON RD #287
City-St-Zip: WESTON, FL 33326

Title: MGR () Delete
Name: MILLS, JEFFREY S
Address: 4934 PELICAN MANOR
City-St-Zip: COCONUT CREEK, FL 33073

Title: MGR (X) Change () Addition
Name: MILLS, JEFFREY S
Address: 1112 WESTON RD #287
City-St-Zip: WESTON, FL 33326

Title: MGR () Delete
Name: COLLIER, JOHN W
Address: 4934 PELICAN MANOR
City-St-Zip: COCONUT CREEK, FL 33073

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

Title: MGR () Delete
Name: WILSON, PAUL
Address: 4934 PELICAN MANOR
City-St-Zip: COCONUT CREEK, FL 33073

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

I hereby certify that the information supplied with this filing does not qualify 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: SARA MILLS

MGR

05/22/2007

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