

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000098860

Entity Name: PF COLLIER LLC

FILED
Feb 16, 2011
Secretary of State

Current Principal Place of Business:

5705 MANGO CIRCLE
NAPLES, FL 34110 US

New Principal Place of Business:

308 SPIDER LILY LANE
NAPLES, FL 34119 US

Current Mailing Address:

C/O SCOTT M. TRUE
308 SPIDER LILY LANE
NAPLES, FL 34119

New Mailing Address:

FEI Number: 27-3505191 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TRUE, SCOTT M
5705 MANGO CIRCLE
NAPLES, FL 34110 US

Name and Address of New Registered Agent:

TRUE, SCOTT M
308 SPIDER LILY LANE
NAPLES, FL 34119 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: SCOTT M. TRUE

02/16/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: PIZZUTI, DON F
Address: 14911 CELLE WAY
City-St-Zip: NAPLES, FL 34110 US

Title: MGRM
Name: PIZZUTI, MARIE
Address: 14911 CELLE WAY
City-St-Zip: NAPLES, FL 34110 US

Title: MGR
Name: TRUE, SCOTT M
Address: 308 SPIDER LILY LANE
City-St-Zip: NAPLES, FL 34119 US

Title: MGRM
Name: BRZEZENSKI, TINA P
Address: 197 PORTLAND STREET
City-St-Zip: BOSTON, MA 02114

Title: MGRM
Name: GAMACHE, LAURA
Address: 197 PORTLAND STREET
City-St-Zip: BOSTON, MA 02114

Title: MGRM
Name: HENRY, LINDA P
Address: 197 PORTLAND STREET
City-St-Zip: BOSTON, MA 02114

I hereby 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: SCOT M. TRUE

MGR

02/16/2011

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