

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L35989

FILED  
Apr 23, 2009  
Secretary of State

**Entity Name:** COLLIER ELECTRIC COMPANY OF FT. MYERS, INC.

**Current Principal Place of Business:**

6200 METRO PLANTATION ROAD  
FORT MYERS, FL 33966

**New Principal Place of Business:**

**Current Mailing Address:**

6200 METRO PLANTATION ROAD  
FORT MYERS, FL 33966

**New Mailing Address:**

**FEI Number:** 65-0162578

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BARBARA M. PIZZOLATO, P.A.  
11920 FAIRWAY LAKES DR, BLDG ONE, SUITE 2  
FT MYERS, FL 33913 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: BERGER, JOHN  
Address: 6200 METRO PLANTATION ROAD  
City-St-Zip: FORT MYERS, FL 33966

Title: DST ( ) Delete  
Name: BERGER, LYNDIA  
Address: 6200 METRO PLANTATION ROAD  
City-St-Zip: FORT MYERS, FL 33966

Title: D ( ) Delete  
Name: BERGER, DAN  
Address: 6200 METRO PLANTATION ROAD  
City-St-Zip: FORT MYERS, FL 33966

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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 exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** JOHN BERGER

DP

04/23/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date