2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M06384

Entity Name: COLLIER FINANCIAL SERVICES, INC.

FILED Apr 27, 2011 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3003 TAMIAMI TRAIL NORTH 2550 GOODLETTE RD. N., #100

SUITE 400 NAPLES, FL 34103 US NAPLES, FL 34103 US

Current Mailing Address: New Mailing Address:

3003 TAMIAMI TRAIL NORTH 2550 GOODLETTE RD. N., #100 SUITE 400 NAPLES, FL 34103 US

FEI Number: 59-2460738 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CORINA, ROBERT D
3003 TAMIAMI TRAIL NORTH
SUITE 400
NAPLES, FL 34103 US
CORINA, ROBERT D
2550 GOODLETTE RD. N., #100
NAPLES, FL 34103 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: 04/27/2011

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DP

NAPLES, FL 34103

Name: FLOOD, THOMAS J

Address: 2550 GOODLETTE RD. N., #100

City-St-Zip: NAPLES, FL 34103 US

Title: COCD

Name: COLLIER, BARRON G II
Address: 2550 GOODLETTE RD. N., #100

City-St-Zip: NAPLES, FL 34103 US

Title: VST

Name: CORINA, ROBERT D

Address: 2550 GOODLETTE RD. N., #100

City-St-Zip: NAPLES, FL 34103 US

Title: COCD

Name: COLLIER, MILES C

Address: 2550 GOODLETTE RD. N., #100

City-St-Zip: NAPLES, FL 34103 US

I hereby 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 all other like empowered.

SIGNATURE: ROBERT D. CORINA VP 04/27/2011