2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000009120

Entity Name: NAHREP COLLIER-LEE, INC.

FILED Mar 18, 2008 Secretary of State

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

5630 COPPER LEAF LANE 1109 SW 45 STREET

NAPLES, FL 34116 US CAPE CORAL, FL 33914 US

Current Mailing Address: New Mailing Address:

5630 COPPER LEAF LANE 1109 SW 45 STREET

NAPLES, FL 34116 CAPE CORAL, FL 33914 US

FEI Number: 20-5460337 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:

DIAZ-PERERA, HILDA L CONTRERAS, BLANCA 1109 SW 45 STREET 5630 COPPER LEAF LANE

NAPLES, FL 34116 CAPE CORAL, FL 33914 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: BLANCA CONTRERAS 03/18/2008

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

DIAZ-PERERA, HILDA L CONTRERAS, BLANCA Name: Name: 5630 COPPER LEAF LANE Address: 1109 SW 45 STREET Address: City-St-Zip: NAPLES, FL 34116 US City-St-Zip: CAPE CORAL, FL 33914 US

Title: () Delete Title: (X) Change () Addition

Name: ALVAREZ, JUAN Name: SUAREZ, GILDA Address: 10600 TAMIAMI TRAIL NORTH, SUITE 603 Address: 13441 ALMOND DR

City-St-Zip: NAPLES, FL 34108 US City-St-Zip: FORT MYERS, FL 33908 US

Title: () Delete Title: (X) Change () Addition

ALVAREZ, NORA Name: ALVAREZ, NORA S Name: 4321 27TH COURT SW, APT 204 4321 27 CT SW, APT 204 Address: Address: City-St-Zip: NAPLES, FL 34116 US City-St-Zip: NAPLES, FL 34116 US

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NORA S. ALVAREZ Τ 03/18/2008