2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000897

FILED Apr 30, 2008 Secretary of State

Entity Name: THE COLLINS CENTER FOR PUBLIC POLICY, INC.

Current Principal Place of Business:			New Principal	New Principal Place of Business:	
SUITE 709	ND AVENUE 9 . 331311572 U	s			
Current Mailing Address:			New Mailing A	New Mailing Address:	
150 SE 2N SUITE 709 MIAMI, FL					
FEI Number	: 65-0397159	FEI Number Applied For ()	FEI Number Not Applicable	e () Certificate of Status Desired ()	
Name and	d Address of C	urrent Registered Agent:	Name and Add	lress of New Registered Agent:	
150 SE 2N SUITE 709 MIAMI, FL	33131 US				
	e named entity s e of Florida.	submits this statement for the p	ourpose of changing its req	gistered office or registered agent, or both,	
SIGNATU					
	Electron	ic Signature of Registered Ag	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CH	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	
Title: Name: Address: City-St-Zip:	AURELL, JANE 1225 LIVE OAK	Delete C PLANTATION ROAD , FL 323121409 US	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	RUMBERGER,	NROE STREET, STE 130	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	DEFOOR, II, J	LEGE AVENUE, STE 311D	Title: Name: Address: City-St-Zip:	() Change () Addition	
Γitle:	D () RUNDLE, KATH 1350 NW 12 AV	/ENUE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Name: Name: Address: City-St-Zip:	MIAMI, FL 331	302119 00			
Name: Address:	MIAMI, FL 331	Delete DY JR. INNEDY BLVD.	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: RODERICK N. PETREY P 04/30/2008