

**2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P00000029953

**FILED**  
**Oct 12, 2006**  
**Secretary of State****Entity Name:** COLLIER CONNECTIONS, INC.**Current Principal Place of Business:**1 WATERCOLOR WAY  
NAPLES, FL 34113**New Principal Place of Business:**2296 CLIPPER WAY  
NAPLES, FL 34104**Current Mailing Address:**1 WATERCOLOR WAY  
NAPLES, FL 34113**New Mailing Address:**2296 CLIPPER WAY  
NAPLES, FL 34104**FEI Number:** 59-3633537**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**CLASP INC.  
3001 TAMiami TRAIL N., 4TH FLOOR  
NAPLES, FL 34103 US**Name and Address of New Registered Agent:**TIMMER, TIMOTHY M MR  
2296 CLIPPER WAY  
NAPLES, FL 34104 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: TIMOTHY M. TIMMER

10/12/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:****Title:** DPTS ( ) Delete  
**Name:** TIMMER, TIMOTHY M  
**Address:** 1 WATERCOLOR WAY  
**City-St-Zip:** NAPLES, FL 34113**Title:** D (X) Delete  
**Name:** TIMMER, COLEEN WALSH  
**Address:** 1 WATERCOLOR WAY  
**City-St-Zip:** NAPLES, FL 34113**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** DPTS (X) Change ( ) Addition  
**Name:** TIMMER, TIMOTHY M  
**Address:** 2296 CLIPPER WAY  
**City-St-Zip:** NAPLES, FL 34104**Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:**

I hereby certify that the information supplied with this filing does not qualify for the 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: TIMOTHY M. TIMMER

MR

10/12/2006

Electronic Signature of Signing Officer or Director

Date