

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 30, 2001 8:00 am
Secretary of State

04-30-2001 90003 004 ***150.00

0012271

DOCUMENT # P00000113901

1. Entity Name

COLLIE INCORPORATED

Principal Place of Business

895 CHAUNCEY COURT
OCOE FL 34761

Mailing Address

895 CHAUNCEY COURT
OCOE FL 34761

2. Principal Place of Business

NON-EXISTENT AT THIS TIME

3. Mailing Address

895 CHAUNCEY COURT

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

OCOE, FL

4. FEI Number

593704070

Applied For

Not Applicable

Zip

Country

Zip

Country

34761

USA

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

COLLINS, LARRY M
895 CHAUNCEY COURT
OCOE FL 34761

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	CHAIRMAN & PRESIDENT	<input type="checkbox"/> Delete
NAME	LARRY M. COLLINS	
STREET ADDRESS	895 CHAUNCEY COURT	
CITY-ST-ZIP	OCOE, FL 34761	
TITLE	VICE PRESIDENT	<input type="checkbox"/> Delete
NAME	SUSAN L. COLLINS	
STREET ADDRESS	895 CHAUNCEY COURT	
CITY-ST-ZIP	OCOE, FL 34761	
TITLE	SECRETARY	<input type="checkbox"/> Delete
NAME	KIMBERLY P. COLLINS	
STREET ADDRESS	895 CHAUNCEY COURT	
CITY-ST-ZIP	OCOE, FL 34761	
TITLE	TREASURER	<input type="checkbox"/> Delete
NAME	JACQUELINE A. COLLINS	
STREET ADDRESS	895 CHAUNCEY COURT	
CITY-ST-ZIP	OCOE, FL 34761	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

LARRY M. COLLINS (LARRY M. COLLINS)

4/24/01

407-312-3613

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)