## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000033758

Entity Name: COLLIER AND ASSOCIATES INC

FILED Mar 30, 2009 Secretary of State

,		., ., ., ., ., ., ., ., ., ., ., ., ., .			
Current Principal Place of Business:			New Principal Place of Business:		
5 WATER' OCEAN R	VIEW DR. IDGE, FL 334	35			
Current Mailing Address:			New Mailing Address:		
5 WATER' OCEAN R	VIEW DR. IDGE, FL 334	35			
FEI Number:	: 65-1099357	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
4000 N. FE	HAEL W ESQ EDERAL HWY TON, FL 3343				
	named entity e of Florida.	submits this statement for the	purpose of changing its registere	d office or registered agent, or both,	
SIGNATUR	RE:				
	Electro	nic Signature of Registered Ag	ent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D ( COLLIER, DAV 5 WATERVIEV OCEAN RIDGE	/ DR.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP ( COLLIER, JOY 5 WATERVIEV OCEAN RIDGE	/ DRIVE	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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID F. COLLIER D 03/30/2009