FILED May 01, 2003 8:00 am Secretary of State

05-01-2003 90976 033 ***150.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

P02000039765

1. Entity Name COLLIER PAINTING, INC.



			GOO WE THE				
Principal Plac	ce of Business	Mailing Address					
2120 SANDPI		2120 SANDPIPER ST.					
NAPLES FL 3	4102	NAPLES FL 34102					
				4 HERIKARI IKO KURIO KINUI ROKKI BRIDI URKIK BUJUR IK	HA IBHI KASUR I		
	Place of Business	3. Mailinn Address		THE STATE OF THE S	IND 18811 FABRO I	HILBI WALLANDE	
2120 SANOPIPER ST. POBOX 306			0,67				
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		CHECK HERE IF MAKING	CHANGES		
		<u> </u>		O O DEON TIETE II MARIITO			
City & State City & State			4. FEI Number	Ар	plied For		
NAP	LKS, FC.	MAPINS, FC.		02-0287203	No	t Applicable	
Zip	Country		Country	5. Certificate of Status Desired	8.75 Add	itional	
3410		34106	U.S.		ee Required		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent			
			Name				
KREBS, JOHN M			Street Address	Street Address (P.O. Box Number is Not Acceptable)			
2120 SANDPIPER ST.			Street Address	s (F.O. Box Number is Not Acceptable)			
NAPLES F	FL 34102						
	2 0 1 1 3 2						
			City	FL	Zip Code	3	
8. The above	named entity submits this statement for	r the purpose of changing its rec	istared office or regist	tered agent, or both, in the State of Florida. I am fa	miliar with	and accent	
	tions of registered agent.	the purpose of changing its reg	gistered diffee of regist	tored agent, or both, in the state of Florida. Fath is	urinital William	and decept	
SIGNATURE							
	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE: Re	gistered Agent signature requi	red when reinstating) DATE			
F	ILE NOW!!! FEE IS \$150.00			6 Stantian Communication Standards	45.0	_	
Afte	May 1, 2003 Fee will be \$550.00	1		S. Efection Campaign Financing Trust Fund Contribution.		May Be to Fees	
Make Check	c Payable to Florida Department of	State		Trust Fund Contribution.	Added	to rees	
10.	OFFICERS AND	DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS	S IN 11	
TITLE	PVST	☐ Delete	TITLE		Change	☐ Addition	
NAME	Krebs, John M		NAME				
STREET ADDRESS	2120 SANDPIPER ST.		STREET ADDRESS				
CITY-ST-ZIP	NAPLES FL 34102		CITY-ST-ZIP				
TITLE		□ Delete	TITLE		☐ Change	Addition	
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on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

4-28-03 Date

239-272-7/23