

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000117110

Entity Name: COLLIS ELECTRIC INC

FILED
Mar 11, 2005
Secretary of State

Current Principal Place of Business:

752 NW AVENS STREET
PORT ST LUCIE, FL 34983

New Principal Place of Business:

752 N.W. AVENS STREET
PORT ST.LUCIE, FL 34983

Current Mailing Address:

752 NW AVENS STREET
PORT ST LUCIE, FL 34983

New Mailing Address:

752 N.W. AVENS STREET
PORT ST.LUCIE, FL 34983

FEI Number: 54-2131070

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLLIS, WILLIAM
752 NW AVENS STREET
PORT ST LUCIE, FL 34983 US

Name and Address of New Registered Agent:

WILLIAM, A. C COLLIS
752 N.W. AVENS STREET
PORT ST.LUCIE, FL, FL 34983 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: WILLIAM A. COLLIS

03/11/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: COLLIS, WILLIAM
Address: 752 NW AVENS STREET
City-St-Zip: PORT ST LUCIE, FL 34983

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
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City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MR (X) Change () Addition
Name: WILLIAM, A. C OLLIS
Address: 752 N.W. AVENS STREET
City-St-Zip: PORT ST.LUCIE, FL 34983

Title: MR () Change (X) Addition
Name: WILLIAM, A. C OLLIS
Address: 752 N.W. AVENS STREET
City-St-Zip: PORT ST.LUCIE, FL 34983

Title: MR () Change (X) Addition
Name: WILLIAM, A. C OLLIS
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City-St-Zip: PORT ST.LUCIE, FL 34983

Title: MR () Change (X) Addition
Name: WILLIAM, A. C OLLIS
Address: 752 N.W. AVENS STREET
City-St-Zip: PORT ST.LUCIE, FL 34983

I hereby certify that the information supplied with this filing does not qualify for the 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 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: WILLIAM A. COLLIS

MR

03/11/2005

Electronic Signature of Signing Officer or Director

Date