2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000117110

Entity Name: COLLIS ELECTRIC INC

FILED Jan 26, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 752 N.W. AVENS STREET PORT ST.LUCIE, FL 34983 **Current Mailing Address: 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: 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: PRFS (X) Change () Addition WILLIAM, A. C OLLIS Name: Name: COLLIS, .WILLIAM A CEO 752 N.W. AVENS STREET 752 N. W. AVENS STREET Address: Address: City-St-Zip: PORT ST.LUCIE, FL 34983 City-St-Zip: PORT ST. LUCIE, FL 34983 (X) Delete Title: Title: () Change () Addition Name: WILLIAM, A. C OLLIS Name: 752 N.W. AVENS STREET Address: Address: PORT ST.LUCIE, FL 34983 City-St-Zip: City-St-Zip: Title: Title: MR (X) Delete () Change () Addition WILLIAM, A. C OLLIS Name: Name: 752 N.W. AVENS STREET Address: Address: PORT ST.LUCIE, FL 34983 City-St-Zip: City-St-Zip: Title: (X) Delete Title: () Change () Addition WILLIAM, A. C OLLIS Name: Name: Address: 752 N.W. AVENS STREET Address: City-St-Zip: PORT ST.LUCIE, FL 34983 City-St-Zip: Title: MR (X) Delete Title: () Change () Addition WILLIAM, A. C OLLIS Name: Name: 752 N.W. AVENS STREET Address: Address: City-St-Zip: PORT ST.LUCIE, FL 34983 City-St-Zip: Title: (X) Delete Title: () Change () Addition WILLIAM, A. C OLLIS Name: Name: 752 N.W. AVENS STREET Address: Address: City-St-Zip: 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 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: WILLIAM A. COLLIS PRES 01/26/2007