

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000061247

FILED
Jan 30, 2009
Secretary of State

Entity Name: COLLIER FINANCIAL SOLUTIONS, INC.

Current Principal Place of Business:

4295 W OLD HWY 441 SUITE 4
MOUNT DORA, FL 32757

New Principal Place of Business:

2025 W. OLD HIGHWAY 441
MOUNT DORA, FL 32757

Current Mailing Address:

4295 W OLD HWY 441 SUITE 4
MOUNT DORA, FL 32757

New Mailing Address:

2025 W. OLD HIGHWAY 441
MOUNT DORA, FL 32757

FEI Number: 20-2741480

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLLIER, GREGORY C SR
3613 CACTUS LANE
MOUNT DORA, FL 32757 US

Name and Address of New Registered Agent:

COLLIER, GREGORY C SR
2025 W. OLD HIGHWAY 441
MOUNT DORA, FL 32757 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:

01/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: COLLIER, GREGORY C SR
Address: 3613 CACTUS LANE
City-St-Zip: MOUNT DORA, FL 32757

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: COLLIER, GREGORY C SR
Address: 2025 W. OLD HIGHWAY 441
City-St-Zip: MOUNT DORA, FL 32757

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: GREGORY C. COLLIER, SR.

D

01/30/2009

Electronic Signature of Signing Officer or Director

Date