

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000008211

FILED  
Jan 09, 2007  
Secretary of State

Entity Name: B & B TOWING OF COLLIER, INC.

## Current Principal Place of Business:

1190 WILDWOOD LAKES BLVD  
NAPLES, FL 34104 US

## New Principal Place of Business:

3863 ENTERPRISE AVE STE 2  
NAPLES, FL 34104 US

## Current Mailing Address:

1190 WILDWOOD LAKES BLVD  
NAPLES, FL 34104 US

## New Mailing Address:

FEI Number: 20-4118438      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORZO, JUAN C  
1190 WILDWOOD LAKES BLVD  
NAPLES, FL 34104 US

## Name and Address of New Registered Agent:

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:

Title: P ( ) Delete  
Name: CORZO, MARIA E  
Address: 1190 WILDWOOD LAKES BLVD  
City-St-Zip: NAPLES, FL 34104

Title: VPST (X) Delete  
Name: CORZO, JUAN C  
Address: 1190 WILDWOOD LAKES BLVD  
City-St-Zip: NAPLES, FL 34104

Title: VP (X) Delete  
Name: HENLEY, CHRISTOPHER P  
Address: 5049 28TH PL SW  
City-St-Zip: NAPLES, FL 34116

Title: VP (X) Delete  
Name: MILBORURN, DEWAYNE  
Address: 1945 46TH TERR SW #101  
City-St-Zip: NAPLES, FL 34116

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change ( ) Addition  
Name: CORZO, JUAN C  
Address: 1190 WILDWOOD LAKES BLVD  
City-St-Zip: NAPLES, FL 34104

Title: ( ) Change ( ) Addition  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City-St-Zip: \_\_\_\_\_

Title: ( ) Change ( ) Addition  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City-St-Zip: \_\_\_\_\_

Title: ( ) Change ( ) Addition  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City-St-Zip: \_\_\_\_\_

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: JUAN C CORZO

P

01/09/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date