

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000017387

FILED  
Jan 13, 2011  
Secretary of State

**Entity Name:** COLLINS PREMO CORPORATION

**Current Principal Place of Business:**

241 ANASTASIA DRIVE  
KISSIMMEE, FL 34759

**New Principal Place of Business:**

**Current Mailing Address:**

241 ANASTASIA DRIVE  
KISSIMMEE, FL 34759

**New Mailing Address:**

250 SW 5TH CT  
#2  
POMPANO BEACH, FL 33060

**FEI Number:** 61-1556315

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

PREMO, LYNN A PRESIDE  
241 ANASTASIA DRIVE  
KISSIMMEE, FL 34759 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: PREMO, LYNN  
Address: 241 ANASTASIA DRIVE  
City-St-Zip: KISSIMMEE, FL 34759

Title: V  
Name: COLLINS, BRAD  
Address: 1566 MUIR CIRCLE  
City-St-Zip: CLERMONT, FL 34711

Title: V  
Name: COLLINS, SEAN  
Address: 310 SE 6TH CT  
City-St-Zip: POMPANO BEACH, FL 33060

Title: V  
Name: COLLINS, RYAN  
Address: 1118 TUXFORD DRIVE  
City-St-Zip: BRANDON, FL 33511

I hereby 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 all other like empowered.

SIGNATURE: LYNN A PREMO

PRES

01/13/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date