FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

1990 PO3000084872 (Q)

COLLIER TRUST CORPC	TISTION .		
rincipa' Place of Business	Mailing Address		
1104 N. COLLIER BLVD. MARCO ISLAND FL 33937	1104 N. COLLIER BLVD. MARCO ISLAND FL 33997		

3a. Date of Last Report 05/01/1995

 Date Incorporated or Qualified 12/06/1993

	ace of Business	2a. Mailing Address 26		4. FEI Number 65-0484068	Applied For Not Applicable		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
		City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
<u>Z</u> η, 2η,	Country 25	7(p)	Cour 30	itry	This corporation has liability for intangible tax under s 199.032, Florida Statutes		
71	9. Name and Address of Curr				10. Name and Address of New Registers	d Agent	
				B1 Name			
Greusel, Jamie B				82 Street Address (P.O. Box Number is Not Acceptable)			
C/O BERRY & GREUSEL 1104 N. COLLIER BLVD.							
				83			
MARCO	ISLAND FL 33937		-	84 City			
				84 City	F	L S Zipcoce	
or register	red agent, or both, in the State of Fle ith, and accept the obligations of, Se Syrupic, then or prived rank of registers Lag	orida. Such change was at ection 607.0505, Florida St	ithorized by the o atutes.	orporation s	rporation submits this statement for the purpose of oboard of directors. I hereby accept the appointment	as registered agent. I am	
12.		AND DIRECTORS	13.	· · · · · · · · · · · · · · · · · · ·	ADDITIONS/CHANGES TO OFFICERS AF	ND DIRECTORS IN 12	
LICE	PSTD	DELET		ſĮŧ		☐ Change ☐ Addition	
NAME	BRAUNSCHWEIG, L.M.		1.2 NA	ME			
STREET ACORESS	DIGGELMANNSTR 29			REET ADDRESS		•	
	CH-8047 ZURICH			Y-\$1-ZIP			
CITY ST ZIP	PSTD	T DELEI				☐ Change ☐ Addition	
	BRAUNSCHWEIG, J		2 2 NA	ì			
NAME STREET ADDRESS	DIGGELMANNSTR 29			REET ADDRESS			
	CH-8047 ZURICH		I	Y-ST-ZIP			
CHY-ST-ZIP THE		[] DELET				Change Addition	
NAMI		_	3 2 NA	ME			
STREET ADDRESS			3 3 S	REET ADDRESS			
CITY - ST-ZIP				Y-S1-ZIP			
Til H		DELET				☐ Change ☐ Addition	
NAME			4.2 NA	ME .			
STREET ADDRESS			4351	REFT ADDRESS			
City - \$1 - Zif			4 4 CI	TY - \$1 - ZIP			
"Mile	-	☐ DELET				Change Addition	
NAM:			5.2 N	ME			
STREET ADDRESS			5381	ree1 adoress			
CITY S1-721			5.4 CI	TY-ST-ZIP			
H'IF		☐ DELET	E 6.17	TLF		Change Addition	
NAME	1		6.2 N/	AME ,	7000017482	<u> </u>	
STREET ADDRESS		_	63 \$1	HEET ADDRESS	7000017482 -03/19/9601017	010	
CITY - ST - Z01		7		TY-ST-ZIP	***200 . 00		
500 1 341 7 2 11					olfs for the exemption stated in Section 119 07(3)(k)	Florida Statutes I further	

14. I do hereby certify that the information supplied with this bing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further cort's that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under cath; 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 in Block 12 or Block 14 or Block 15 or Block 15 or Block 15 or Block 15 or Block 16 or Block 16 or Block 16 or Block 17 or Block 18 or Block 19 or Bl

SIGNATURE:

SNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DISECTOR

2ate (941) 394°47′52

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