FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

CORPORATION ANNUAL REPORT

1998

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

FILED

May 01 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P93000085269 (7)

COLLIER DALY CONTRACTORS INC.

Mailing Address CONTRACTORS Principal Place of Business COLLIER DALY COMTRACTED 509 SE 6TH AVE BOYNTON BEACH FL 33435 509 SE 6TH AVE **BOYNTON BEACH FL 33435** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/09/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 65-0458999 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 25 29 30 Personal Property Tax due June 30. Yes 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name DALY, MARK C 915 S.E. 3 ED STREET 10 FAYETTE DR Street Address (P.O. Box Number is Not Acceptable) 22436 BOYNTON BEACH, FL 33 435 83 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 1097 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE D 1.1 TITLE Change ☐ Addition TITLE **COLLIER, JOY** NAME 1.2 NAME 509 SE 6TH AVE STREET ADDRESS 1.3 STREET ADDRESS **BOYNTON BEACH FL** 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Addition Change TITLE 2.1 TITLE DALY, MARK 2.2 NAME STREET ADDRESS 509 SE 6TH AVE 2.3 STREET ADDRESS **BOYNTON BEACH FL** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change ■ Addition 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change ■ Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS**

6.4 CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify 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 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 in Block 12 or Block 13 if changed, or opening the corporation of the corporation of