FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000010574 (9)**

1. Corporation Name
COL PAR, INC.

Principal Place of Business	Mailing Address
900 EAST INDIANTOWN RD. JUPITER FL 33477	900 EAST INDIANTOWN RD. JUPITER FL 33477

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02/09/1994
3a. Date of Last Report:

2. Principal Place of Business	2a. Mailing Address
21 1001 N. U.S. Highway One	26 1001 N. U.S. Highway One
Suite, Apt. #, etc 22 Suite 400	Suite, Apt. #, etc 27 Suite 400
City & State 23 Jupiter, FL	City & State 28 Jupiter, FL
Zip / Country 24 33477 / 25	Zip / Country 29 33477 / 30

4. FEI Number: 650467692 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under § 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
~~FILING9, INC.~~ ~~3792 N.W. 16TH ST.~~ ~~FT. LAUDERDALE FL 33311~~	81 Name: Anthony J. Colucci, Jr. 82 Street Address (P.O. Box Number is Not Acceptable): 1001 N. U.S. Highway One 83: Suite 400 84 City: Jupiter FL 85 Zip Code: 33477

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] 1/20/95
(Typed or printed name of registered agent and title if applicable) (DATE) (Registered Agent signature required when reinstated)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	11 TITLE	P, P, V, T, S	☒ Change ☐ Addition
NAME	~~PARKEY, DOUGLAS B~~	12 NAME	Colucci, Anthony, J., Jr.	
STREET ADDRESS	~~11760 U.S. HIGHWAY #1~~	13 STREET ADDRESS	1001 N. U.S. Highway One, Suite 400	
CITY ST ZIP	~~N PALM BEACH FL 33408~~	14 CITY ST ZIP	Jupiter, FL 33477	
TITLE		21 TITLE		☐ Change ☐ Addition
NAME		22 NAME		
STREET ADDRESS		23 STREET ADDRESS		
CITY ST ZIP		24 CITY ST ZIP		
TITLE		31 TITLE		☐ Change ☐ Addition
NAME		32 NAME		
STREET ADDRESS		33 STREET ADDRESS		
CITY ST ZIP		34 CITY ST ZIP		
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY ST ZIP		44 CITY ST ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY ST ZIP		54 CITY ST ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY ST ZIP		64 CITY ST ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 on an attachment with an address.

SIGNATURE: [signature] 1/21/95 407-747-0110
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER, TITLE (Date) (Daytime Phone #)
Anthony J. Colucci, Jr.

0273092 CP