

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000011730 (6)

1. Corporation Name
COLLINS DEVELOPMENT, INC.



Principal Place of Business

3840 CROWN POINT ROAD, SUITE A
JACKSONVILLE FL 32257

Mailing Address

3840 CROWN POINT ROAD, SUITE A
JACKSONVILLE FL 32257

2. Principal Place of Business

21 State, Apt., etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 State, Apt., etc.

27 City & State

28 Zip Country

29

9. Name and Address of Current Registered Agent

KNOWLES, MARK A
3840 CROWN PT RD
STE A
JAX FL 32257

3. Date Incorporated or Qualified
02/07/1994

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

4. FEI Number
59-3224446

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 s. 199.032, Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1505, 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

12. Signature of Registered Agent

Signature of Registered Agent

DATE

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. NAME
D COLLINS, J D
3840 CROWN PT RD, STE A
JAX FL

2. NAME
VTS

3. NAME
KNOWLES, MARK A
3840 CROWN PT RD, STE A
JAX FL

4. NAME
V

5. NAME
HOLLAND, BEVERLY J
3840 CROWN PT RD, STE A
JAX FL

6. NAME

7. NAME

8. NAME

9. NAME

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P/D

☒ Change ☐ Addition

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14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

Mark A. Knowles

Mark A. Knowles, V.P.

2/22/96

904-268-8500

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Phone # (Area Code)

CR2E034 (12/95)