

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

95 MAR 13 PM 2:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000055165**
1. Corporation Name
Collector Cars Of Naples, Inc.

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified July 25, 1994	3a. Date of Last Report None
4. FEI Number 65-0513007	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	

Principal Place of Business		Mailing Address	
1133 Industrial Blvd. Unit # 10 Naples, FL. 33942			
2. Principal Place of Business	2a. Mailing Address		
21 1133 Industrial Blvd.	26 Same		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		
22 Unit # 10	27		
City & State	City & State		
23 Naples, FL. 33942	28		
Zip	Country	Zip	Country
24 33942	25 Collier	29	30

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
Donald R. Woodhams 3399 Gulf Shore Blvd. N. Naples, FL. 33940		81 Name	
		82 Street Address (P.O. Box Number is Not Acceptable)	
		83	
		84 City	
		85 Zip Code	
		FL	

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 **Donald R. Woodhams** *Donald R. Woodhams* **3-1-95**
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	President	1.1 TITLE	☐ Change ☐ Addition
NAME	Deane F. Madison	1.2 NAME	
STREET ADDRESS	4901 Gulf Shore Blvd.	1.3 STREET ADDRESS	
CITY- ST- ZIP	Naples, FL. 33940	1.4 CITY- ST- ZIP	
TITLE	Sec.	2.1 TITLE	☐ Change ☐ Addition
NAME	Phyllis J. Madison	2.2 NAME	
STREET ADDRESS	4901 Gulf Shore Blvd.	2.3 STREET ADDRESS	
CITY- ST- ZIP	Naples, FL. 33940	2.4 CITY- ST- ZIP	
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY- ST- ZIP		3.4 CITY- ST- ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY- ST- ZIP		4.4 CITY- ST- ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY- ST- ZIP		5.4 CITY- ST- ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY- ST- ZIP		6.4 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 110.07(3)(k), Florida Statutes. I further certify that the information included 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: *Deane F. Madison* **Deane F. Madison Pres.** **3-1-95**
(NOTE: Signature and typed name of signing officer or director)

DW **3-13-95**