

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000077025

FILED
Jan 23, 2004
Secretary of State

Entity Name: CHECKER CAB OF COLLIER COUNTY, INC.

Current Principal Place of Business:

3966 ARNOLD AVENUE
NAPLES, FL 34104 US

New Principal Place of Business:

3047 TERRACE AVENUE
SUITE B
NAPLES, FL 34104 US

Current Mailing Address:

3966 ARNOLD AVENUE
SUITE B
NAPLES, FL 34104 US

New Mailing Address:

3047 TERRACE AVENUE
SUITE B
NAPLES, FL 34104 US

FEI Number: 65-0577626

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DOUGHERTY, JOHN
449 FOREST HILLS BLVD.
NAPLES, FL 34113

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: DOUGHERTY, JOHN
Address: 449 FOREST HILLS BLVD
City-St-Zip: NAPLES, FL 34113

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN DOUGHERTY

PRES

01/23/2004

Electronic Signature of Signing Officer or Director

Date