

2000 UNIFORM BUSINESS REPORT (UBR)**FILED****Sep 13, 2000 08:00 AM****Secretary of State****DOCUMENT # P94000085826**1. Entity Name
COLLIER GROUP, INC.

Principal Place of Business

25070 PINEWATER COVE LANE

BONITA SPRINGS

34135

US

FL

Mailing Address

25070 PINEWATER COVE LANE

BONITA SPRINGS

34134

US

FL

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

65-0548180

Applied For

Not Applicable

5. Certificate of Status Desired

☐**\$8.75** Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

KRAUS THOMAS
25070 PINEWATER COVE LANE

BONITA SPRINGS

34135

US

FL

7. Name and Address of New Registered Agent

Name

KRAUS THOMAS

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

25070 PINEWATER COVE LANE

City

BONITA SPRINGS

FL

Zip Code
34134

8. 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

09/13/2000

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒**FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME KRAUS JASON
STREET ADDRESS 2651 DACEY AVENUE
CITY-ST-ZIP CINCINNATI OH 45209TITLE D ☐ Delete
NAME KRAUS STEFAN
STREET ADDRESS 5608 WARREN AVENUE
CITY-ST-ZIP CINCINNATI OH 45212TITLE D ☐ Delete
NAME GORDON JOLIE
STREET ADDRESS 8015 STILLWATER COURT, #3
CITY-ST-ZIP FT MYERS FL 33903TITLE P ☐ Delete
NAME KRAUS THOMAS
STREET ADDRESS 25070 PINEWATER COVE
CITY-ST-ZIP BONITA SPRINGS FL 34135TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE D ☒ Change ☐ Addition
NAME GORDON JOLIE
STREET ADDRESS 3712 S. ELK RIDGE DR
CITY-ST-ZIP MAGNA UT 84044TITLE P ☒ Change ☐ Addition
NAME KRAUS THOMAS
STREET ADDRESS 25070 PINEWATER COVE
CITY-ST-ZIP BONITA SPRINGS FL 34134TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Thomas Kraus

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09/13/2000