

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000017018

FILED
Apr 09, 2006
Secretary of State

Entity Name: COLLIER TIRES & AUTO REPAIRS, INC.

Current Principal Place of Business:

3906 EXCHANGE AVE
NAPLES, FL 34104

New Principal Place of Business:

Current Mailing Address:

C/O JAMES O. BIRR JR. ESQ
1650 N.E. 26TH STREET #101
FORT LAUDERDALE, FL 33305 US

New Mailing Address:

C/O JAMES O. BIRR JR. ESQ
1650 N.E. 26TH STREET, SUITE 101
FORT LAUDERDALE, FL 33305 US

FEI Number: 65-0563856

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BIRR, JAMES O JR ESQ.
1650 NE 26TH ST STE 101
FT. LAUDERDALE, FL 33305 US

Name and Address of New Registered Agent:

BIRR, JAMES O JR ESQ.
1650 NE 26TH STREET
SUITE 101
FT. LAUDERDALE, FL 33305 US

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: JAMES O. BIRR, JR.

04/09/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPST () Delete
Name: WAGNER, CHARLES W
Address: 3906 EXCHANGE AVE
City-St-Zip: NAPLES, FL 34104

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 Chapter 119, 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: CHARLES W. WAGNER

PRES

04/09/2006

Electronic Signature of Signing Officer or Director

Date