FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT
1996

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

DOCUMENT # P95000041700 (2)

1. Corporation Name
COLLIER ABSTRACT, INC.

Principal Place of Business
2335 TAMIAMI TRAIL NO.
NAPLES FL 33940

Mailing Address
2335 TAMIAMI TRAIL NO.
NAPLES FL 33940

3. Date Incorporated or Qualified: 05/22/1995	3a. Date of Last Report
4. FEI Number: 65-0591133	☐ 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	

2. Principal Place of Business	2a. Mailing Address
21 2335 Tamiami Trail North	26 same
Suite, Apt. #, etc. 22 Suite 310	Suite, Apt. #, etc. 27
City & State 23 Naples, FL	City & State 28
Zip 24 33940 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

GOLD, DENNIS S ESQ.
2335 TAMIAMI TRAIL NO.
NAPLES FL 33940

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 607.1508, 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
Signature, typed or printed name of new registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	D	☐ DELETE
NAME	GOLD, DENNIS S	
STREET ADDRESS	2335 TAMIAMI TRAIL NO.	
CITY-ST-ZIP	NAPLES FL 33940	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D/T	☒ Change ☐ Addition
1.2 NAME	GOLD, DENNIS S.	
1.3 STREET ADDRESS	2335 Tamiami Trail North, #301	
1.4 CITY-ST-ZIP	Naples, FL 33940	
2.1 TITLE	P	☐ Change ☒ Addition
2.2 NAME	MORRIS, CANDACE E.	
2.3 STREET ADDRESS	2335 Tamiami Trail North, #310	
2.4 CITY-ST-ZIP	Naples, FL 33940	
3.1 TITLE	VP	☐ Change ☒ Addition
3.2 NAME	MORRIS, RAYMOND J.	
3.3 STREET ADDRESS	2335 Tamiami Trail North, #310	
3.4 CITY-ST-ZIP	Naples, FL 33940	
4.1 TITLE	S	☐ Change ☒ Addition
4.2 NAME	DILLON, SYLVIA	
4.3 STREET ADDRESS	2335 Tamiami Trail North, #310	
4.4 CITY-ST-ZIP	Naples, FL 33940	
5.1 TITLE	AT	☐ Change ☐ Addition
5.2 NAME	BERK, BEVERLEY A.	
5.3 STREET ADDRESS	2335 Tamiami Trail North, #301	
5.4 CITY-ST-ZIP	Naples, FL 33940	
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

CR2E034 (12/95)

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 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: Raymond J. Morris Vice President — 2/15/96 — (941) 643-5252
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
Raymond J. Morris, VP