

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000047553

FILED
Jan 19, 2005
Secretary of State

Entity Name: WILLIAM A. COLLISON, JR., P.A.

Current Principal Place of Business:

THE COLLISONS
4706 MULLEN ROAD
NEW BERN, NC 28560

New Principal Place of Business:

4706 MULLEN ROAD
NEW BERN, NC 28560

Current Mailing Address:

THE COLLISONS
4706 MULLEN ROAD
NEW BERN, NC 28560

New Mailing Address:

4706 MULLEN ROAD
NEW BERN, NC 28560

FEI Number: 65-0667702

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOBIN, MARC S ESQ
DOBIN & JENKS, LLP
140 INTRACOASTAL POINT DRIVE SUITE 307
JUPITER, FL 33477 US

Name and Address of New Registered Agent:

DOBIN, MARC S ESQ
140 INTRACOASTAL POINTE DRIVE
SUITE #403
JUPITER, FL 33477 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:

01/19/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution (X).

OFFICERS AND DIRECTORS:

Title: PVPS () Delete
Name: COLLISON, WILLIAM A. JR.
Address: THE COLLISONS 4706 MULLEN ROAD
City-St-Zip: NEW BERN, NC 28560

Title: T () Delete
Name: COLLISON, CHRISTINA S.
Address: THE COLLISONS 4706 MULLEN ROAD
City-St-Zip: NEW BERN, NC 28560

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVPS (X) Change () Addition
Name: COLLISON, WILLIAM A. JR.
Address: 4706 MULLEN ROAD
City-St-Zip: NEW BERN, NC 28560

Title: T (X) Change () Addition
Name: COLLISON, CHRISTINA S.
Address: 4706 MULLEN ROAD
City-St-Zip: NEW BERN, NC 28560

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: CHRISTINA S. COLLISON

T

01/19/2005

Electronic Signature of Signing Officer or Director

Date