## **2004 FOR PROFIT CORPORATION ANNUAL REPORT**

## **DOCUMENT # P97000055060**

I. Entity Name

WAYNE D. COLLIER BUILDER, INC.



**FILED** Apr 02, 2004 08:00 AM Secretary of State

Principal Place of Business

465 OCEAN GROVE CIRCLE ST AUGUSTINE, FL 32080

Mailing Address

465 OCEAN GROVE CIRCLE ST AUGUSTINE, FL 32080



03242004

No Chg-P

CR2E034 (10/03)

4. FEI Number 59-3456286 Applied For Not Applicabl

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**DO NOT WRITE IN THIS SPACE** 

COLLIER, WAYNE D **465 OCEAN GROVE CIRCLE** ST AUGUSTINE, FL 32080

## DO NOT WRITE IN THIS SPACE

	e named entity submits this statement for the p tions of registered agent	urpose of changing its registere	d office or r	egistered agent, or b	oth, in the State of Florida. I ar	m familiar with, an	d accep
3IGNATURE.	Signature, typed or printed name of registered agent and title in	taplicable IAIOTE Registered	Agort possible	e required when reinstating)	DATE	-	
	Signature, typed or printed name or registered agent and title i	- applicable (NCTE, heg)siereo	Agen signatur	e recured when remodate (g)	T	· 	
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		<ol><li>Election Campaign Finant Trust Fund Contribution.</li></ol>	cing	\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	CTORS _			· · · · · · · · · · · · · · · · · · ·		
TITLE TAME THREET ADDRESS TITLE TAME TAME TAME TAME TAME TAME TAME TAM	DPST COLLIER, WAYNE D 465 OCEAN GROVE CIRCLE ST AUGUSTINE, FL 32080				: 000000101094 04/02/04-80036-0	168 15 <b>0.</b> 00	
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indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as it 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 10 or Block 11 changed, or on an attachment with an address, with all other like empowered

12. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119 07(3)(i), Florida Statutes, I further certify that the information

SIGNATURE:

3-31-at 904 461-7356