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May 11, 1999 8:00 am
Secretary of State

05-11-1999 90033 044 ***150.00

**PROFIT
CORPORATION
ANNUAL REPORT
1999**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000104992

1. Corporation Name
COLLIER ENTERPRISES, INC.

Principal Place of Business
**3003 TAMiami TRAIL NORTH
NAPLES FL 34103**

Mailing Address
**3003 TAMiami TRAIL NORTH
NAPLES FL 34103**



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/12/1997

4. FEI Number

59-3504576

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 owes the current year intangible
Personal Property Tax. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**FLORA, TERRY L
3003 TAMiami TRAIL NORTH
NAPLES FL 34103**

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 registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETE
NAME **COLLIER, MILES C**
STREET ADDRESS **3003 TAMiami TRAIL N**
CITY-ST-ZIP **NAPLES FL**

TITLE **DP** ☐ DELETE
NAME **FLOOD, THOMAS J**
STREET ADDRESS **3003 TAMiami TRAIL N**
CITY-ST-ZIP **NAPLES FL**

TITLE **DVS** ☐ DELETE
NAME **FLORA, TERRY L**
STREET ADDRESS **3003 TAMiami TRAIL N**
CITY-ST-ZIP **NAPLES FL**

TITLE **AT** ☒ DELETE
NAME **KURTYKA, DEBORAH L**
STREET ADDRESS **3003 TAMiami TRAIL N**
CITY-ST-ZIP **NAPLES FL**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **D** ☐ Change ☒ Addition
1.2 NAME **Read, Isabel Collier**
1.3 STREET ADDRESS **3003 Tamiami Trail, Suite 400**
1.4 CITY-ST-ZIP **Naples, FL 34103**

2.1 TITLE **D** ☐ Change ☒ Addition
2.2 NAME **Collier, Barron G. II**
2.3 STREET ADDRESS **3003 Tamiami Trail North, Suite 400**
2.4 CITY-ST-ZIP **Naples, FL 34103**

3.1 TITLE **P** ☒ Change ☐ Addition
3.2 NAME **Flood, Thomas J.**
3.3 STREET ADDRESS **3003 Tamiami Trail North, Suite 400**
3.4 CITY-ST-ZIP **Naples, FL 34103**

4.1 TITLE **V** ☐ Change ☒ Addition
4.2 NAME **Birr, Jeffrey M.**
4.3 STREET ADDRESS **3003 Tamiami Trail North, Suite 400**
4.4 CITY-ST-ZIP **Naples, FL 34103**

5.1 TITLE **V** ☐ Change ☒ Addition
5.2 NAME **Taylor, Michael O.**
5.3 STREET ADDRESS **3003 Tamiami Trail North, Suite 400**
5.4 CITY-ST-ZIP **Naples, FL 34103**

6.1 TITLE **VS** ☒ Change ☐ Addition
6.2 NAME **Flora, Terry L.**
6.3 STREET ADDRESS **3003 Tamiami Trail North, Suite 400**
6.4 CITY-ST-ZIP **Naples, FL 34103**

14. 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 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/19/99

Date

Daytime Phone #

(941)

261-4455

CR2E034 (11/98)

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FLORIDA DEPARTMENT OF STATE
PROFIT CORPORATION ANNUAL REPORT 1999

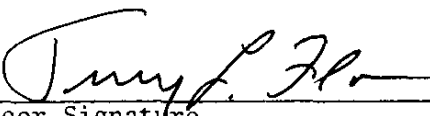
DOCUMENT # P97000104992

COLLIER ENTERPRISES, INC.

Block 13 Continued

title	V/T	Addition
name	O'Connor, John D.	
street address	3003 Tamiami Trail North, Suite 400	
city, st, zip	Naples, FL 34103	

title	AT	Addition
name	Corina, Robert D.	
street address	3003 Tamiami Trail North, Suite 400	
city, st, zip	Naples, FL 34103	



Officer Signature

4/11/99

Date

941-261-4455

Daytime Phone

Terry L. Flora