2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000104992

COLLIÉR ENTERPRISES INC

Principal Place of	Rusiness	Mailing Address		
TAMIAMI TRAIL NORTH SUITE 400		3003 TAMIAMI TRAIL SUITE 400 NAPLES FL 34103-27		
		3. Mailing Address	·	
		Suite, Apt. #, etc.		
		City & State	4. FEI N	
Zip	Country	Zip	Country	5. Certi
- 6		7. Name		
FLORA, TERRY L 3003 TAMIAMI TRAIL NORTH NAPLES FL 34103			Street Add	dress (P.O. Box N

FILED May 08, 2000 8:00 am Secretary of State

05-08-2000 90202 039 ***150.00



Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE							
City & State		City & State		4. FEI Number 59-3504576				pplied For lot Applicable			
Zip	Country Zip C			ountry 5. Certificate		of Status Desired		\$8.75 Ac	iditional		
	6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent						
FLORA, TERRY L 3003 TAMIAMI TRAIL NORTH NAPLES FL 34103				Name Street Address	(P.O. Box Numbe	r is Not Acceptable	:)				
			}	Ste. 400							
			ļ	City	<u> </u>		FI	Zip Co	de		
8. The above	named entity submits this statement for	the purpose of changing its	registere	d office or registe	red agent, or bot	h, in the State of Flo	orida.				
SIGNATURE .	Signature, typed or printed name of registered agent an	d title if applicable (NOTE	: Registered	Agent signature require	d when reinstating)		DATE				
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) FILE NOW!!! After MAY 1, 2000 Make Check Payable		00 Fee	will be \$550.00	Tru	ction Campaign Fir st Fund Contribution		\$5.0 Adde	00 May Be ed to Fees			
11.	OFFICERS AND D	PIRECTORS	12.		ADDITIONS	CHANGES TO OFF	ICERS AN	D DIRECTOR	RS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	0000 11 4712 471			Co.	Collier, Miles C.						
NAME STREET ADDRESS CITY-ST-ZIP	DP FLOOD, THOMAS J 3003 TAMIAMI TRL N NAPLES FL	XI Delete		F1 30	S (VPLEAU ore, Text	TOUSECRETA y L. i Troil N,	-	☐ Change	⊠ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FLOOD, THOMAS J 3003 TAMIAMI TRL N NAPLES FL 34103	☐ Delete		et address 30	(VP FUNA:	ce s admin Sho D I Trail N,		TEN Change	Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT KURTYKA, DEBORAH L 3003 TAMIAMI TRL N NAPLES FL	Ži Delete		ET ADDRESS 3.0		1 Collier i Trail N, 34103	#400	☐ Change	₫ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BIRR, JEFFREY M 3003 TAMIAMI TRAIL NORTH SUI NAPLES FL 34103	☐ Delete		D Co ET ADDRESS 30 -ST-ZIP N.C.	lliar, Ba 03 Iomian olas, W.	rrom G IX i Trail N, 34103		☐ Change			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V TAYLOR, MICHAEL O 3003 TAMIAMI TRAIL NORTH, SU NAPLES FL 34103	☐ Delete		ET ADDRESS 35	ė (Direct Drina, ko	OR TANATIO BERT D. WI TRAIL N			NGD Addition		

13. I hereby 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 indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR