


# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Sep 08, 2003 8:00 am**  
**Secretary of State**

09-08-2003 90129 029 \*\*\*150.00

0079311 AV

<b>DOCUMENT #</b> P99000003102	
1. Entity Name COLLINS ORGANIZATION, INC.	

Principal Place of Business 1381 N KILLIAN DR LAKE PARK FL 33403	Mailing Address 1381 N KILLIAN DR LAKE PARK FL 33403
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JUL 10 2003



2. Principal Place of Business 14771 66 TRAIL	3. Mailing Address 14771 66 TRAIL
Suite, Apt. #, etc.	Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State PALM BEACH GARDENS, FL	City & State PALM BEACH GARDENS, FL
Zip 33418	Zip 33418
Country	Country

4. FEI Number 65-0888055	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent  COLLINS, LANE H 14771 66 TRAIL PALM BEACH GARDENS FL 33418
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7. Name and Address of New Registered Agent  Name Street Address (P.O. Box Number is Not Acceptable)  City FL Zip Code
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE LANE COLLINS DATE 9-2-03  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

<b>FILE NOW!!! FEE IS \$550.00</b> <b>After September 10, 2003 Fee will be \$750.00</b> <b>Make Check Payable to Florida Department of State</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
P COLLINS, LANE H 14771 66 TRAIL PALM BEACH GARDENS FL 33418	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Delete
V KAVENSKY, KEN 1381 N. KILLIAN DR. LAKE PARK FL 33403	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Delete
T COLLINS, ELIDE 1381 N. KILLIAN DR. LAKE PARK FL 33403	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** LANE COLLINS **REQUIRED** 9-2-03 561-773-2121  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (4/03)

attachment

# **COLLINS**

**ORGANIZATION, INC.**

**GBD, INC. CGC 052754**

10/19/01  
Lane Collins

90154471

#P99000003102

September 2, 2003

Florida Department of State  
Division of Corporations  
P.O. Box 1500  
Tallahassee, FL 32302-1500

RE: Collins Organization, Inc.  
# P9900003102

Dear Sirs,

Our corporation did not receive, or was notified of the renewal for our "Uniform Business Report". The mix-up may have occurred because our office moved last year. Please make the following address change and the acceptance of our annual filing fee.

Sincerely,

  
Lane Collins  
President

cc: Rick Reyes, PA

14771 66 Trail  
Palm Beach Gardens, FL 33418  
OFFICE: 561.719.2121 FAX: 561.691.3957