


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 27, 2006 08:00 AM
Secretary of State

DOCUMENT # P99000033398

1. Entity Name
COLLIER COUNTY CONSTRUCTION SERVICES INC.



Principal Place of Business Mailing Address

1495 RAILHEAD BLVD. 1495 RAILHEAD BLVD.
 #11 #11
 NAPLES, FL 34110 NAPLES, FL 34110



02252008 No Chg P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3569455	Applied For Not Applicable
5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$8.75 Additional Fee Required

8. Name and Address of Current Registered Agent

WANDERON, THOMAS
8915 TAMiami TRAIL NORTH, STE. 2
NAPLES, FL 34108

DO NOT WRITE IN THIS SPACE

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 _____ DATE _____
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when registering)

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

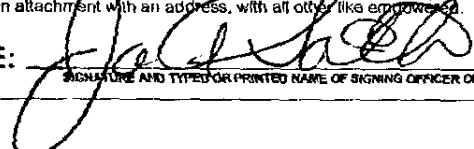
9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CUENYA, DANIEL O 809 WALKERBILT RD., STE. 6 NAPLES, FL 34110
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GUNTHER, DON J 8665 BAY COLONY DR. #2204 NAPLES, FL 34108
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SATKOWIAK, JAMES 15030 N PEBBLE LN FORT MYERS, FL 33912
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP WILLIAMS, BRUCE 1260 39TH ST SW NAPLES, FL 34117
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 03/08/06-80047-006 158.75

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 empowerments.

SIGNATURE:  **2-25-06** **239-597-9817**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #