

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000054736

1. Entity Name

COLLIER ELECTRIC COMPANY, INC.

FILED
Sep 07, 2000 8:00 am
Secretary of State

09-07-2000 90062 006 ***550.00

Principal Place of Business

515 POST OAK BLVD., STE. 450
HOUSTON TX 77027

Mailing Address

515 POST OAK BLVD., STE. 450
HOUSTON TX 77027

2. Principal Place of Business

3984 Progress Avenue

Suite, Apt. #, etc.

3. Mailing Address

3984 Progress Avenue

Suite, Apt. #, etc.

City & State

Naples FL

City & State

Naples FL

4. FEI Number

74-2923443

Applied For

Not Applicable

Zip

34104

Country

Zip

34104

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required 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!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME D
STREET ADDRESS WOMBWELL, JOHN F
CITY-ST-ZIP 515 POST OAK BLVD., STE. 450
HOUSTON TX 77027

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 1800 West Loop South, Suite 500
CITY-ST-ZIP Houston, TX 77027

TITLE ☐ Change ☒ Addition
NAME P
STREET ADDRESS Dennis M. Lawton
CITY-ST-ZIP 3984 Progress Avenue
Naples FL 34104

TITLE ☐ Change ☒ Addition
NAME V/S
STREET ADDRESS Robert H. Klink
CITY-ST-ZIP 3984 Progress Avenue
Naples FL 34104

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 11 or Block 12 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

9/5/2000

Date

(741) 643-2444

Daytime Phone #

CR2E034 (5/00)