

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J12292

FILED
Jan 14, 2004
Secretary of State

Entity Name: COTTON'S ALL LINES INSURANCE, INC.

Current Principal Place of Business:

% RICHARD MIKEL COTTON
1222 N.W. 16TH AVE.
GAINESVILLE, FL 32601

New Principal Place of Business:

Current Mailing Address:

% RICHARD MIKEL COTTON
1222 N.W. 16TH AVE.
GAINESVILLE, FL 32601

New Mailing Address:

FEI Number: 59-2965764

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COTTON, RICHARD MIKEL
1222 N.W. 16TH AVE.
-
GAINESVILLE, FL 32601

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: COTTON, RICHARD MIKE, L
Address: 1617 N.W. 22ND STREET
City-St-Zip: GAINESVILLE, FL

Title: SD () Delete
Name: COTTON, DEBRA E.,
Address: 1617 N.W. 22ND STREET
City-St-Zip: GAINESVILLE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICHARD MIKEL COTTON

PD

01/14/2004

Electronic Signature of Signing Officer or Director

Date