## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000021442

1. Entity Name
COLE CONTRACTING CORPORATION

FILED Apr 09, 2008 08:00 Al Secretary of State

Principal Place of Business

3275 81ST CT E BRADENTON, FL 34211 Mailing Address

3275 81ST CT E BRADENTON, FL 34211



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01182008 No Chg-P CR2E034 (11/05)

4. FEI Number		Applied For
51-044 <u>806</u> 6		Not Applicable
5. Certificate of Status Desired	\$8.75 Fee Rec	Additional uired

6. Name and Address of Current Registered Agent

MEYER, ROBERT C JR. 719 MISTY POND CT. BRADENTON, FL 34212

## DO NOT WRITE IN THIS SPACE

the obligat	ions of registered agent.			,
SIGNATURE_	Signature, typed or printed name of registered agent and title if	applicable. (NOTE: Registered	Agent signature required when reinstating)	DATE
FIL After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Finance     Trust Fund Contribution.	\$5.00 May Be Added to Fees	U00000887188 04/21/08-80010-012 150.00
10.	OFFICERS AND DIRECT	TORS	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	921 171 1 1 20 7 4 4 5 1 2 March 2 Mr.
TITLE NAME STREET AODRESS CITY-ST-2IP	DPST MEYER, ROBERT C JR. 719 MISTY POND COURT BRADENTON, FL 34212			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-51-ZIP		·	ÎÑ.	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				

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

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 empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PAUMED NAME OF SIGNING OFFICER OR DIRECTOR

4/1/0

941,1030

Daytime Phone #