

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Apr 23 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **G15929** (4)

1. Corporation Name
R. JOHN COLE, II, P.A.



Principal Place of Business 46 NORTH WASHINGTON BLVD STE 12 SARASOTA FL 34236 US	Mailing Address 46 N. WASHINGTON BLVD STE 12 SARASOTA FL 34236-5928 US
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3. Date Incorporated or Qualified 12/30/1982	3a. Date of Last Report 04/17/1996
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2. Principal Place of Business 46 N. Washington Blvd.	2a. Mailing Address 46 N. Washington Blvd.
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4. FEI Number 59-2257722	Applied For <input type="checkbox"/> Not Applicable
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Suite, Apt. #, etc. Suite 24	Suite, Apt. #, etc. Suite 24
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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City & State Sarasota, FL 34236	City & State Sarasota, FL 34236
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6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
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Zip 34236	Country Sarasota	Zip 34236	Country Sarasota
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8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent
COLE, R. J III
46 N. WASHINGTON BLVD
STE 12
SARASOTA FL 34236

10. Name and Address of New Registered Agent
81 Name **R. John Cole, II**
82 Street Address (P.O. Box Number is Not Acceptable)
46 N. Washington Blvd.
83 **Suite 24**
84 City **Sarasota** **FL** 85 Zip Code **34236**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *R. John Cole, II* **4/17/97**
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS	
TITLE PD	<input type="checkbox"/> DELETE
NAME COLE, R. JOHN, II	
STREET ADDRESS 46 N. WASHINGTON BLVD, STE 12	
CITY - ST - ZIP SARASOTA FL	
TITLE <input type="checkbox"/> DELETE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE <input type="checkbox"/> DELETE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE <input type="checkbox"/> DELETE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE <input type="checkbox"/> DELETE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME Cole, R. John, II	
1.3 STREET ADDRESS 46 N. Washington Blvd., Suite 24	
1.4 CITY - ST - ZIP Sarasota, FL 34236	
2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *R. John Cole, II* **4/17/97** **(941) 365-4055**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone

CR2E034 (9/96)