2006 FOR PROFIT CORPORATION

**ANNUAL REPORT** 

**DOCUMENT #371756** 1. Entity Name COLÉ CONSTRUCTION, INC.

Principal Place of Business

Mailing Address

10842 OLD GAINESVILLE ROAD JACKSONVILLE, FL 32221-1910 10842 OLD GAINESVILLE ROAD JACKSONVILLE, FL 32221-1910

## FILED Apr 27, 2006 08:00 AN **Secretary of State**

Fee Required



DO NOT WRITE IN THIS SPACE

04202006 No Chg-P CR2E034 (11/05)

Applied For 4. FEI Number 59-1367484 Not Applicable \$8.75 Additional 5. Certificate of Status Desired

6. Name and Address of Current Registered Agent

MARTIN SACK, JR. A 2064 PARK STREET JACKSONVILLE, FL 32204

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

SIGNATURE.

(NOTE Registered Agent signature required when reinstating)

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

U00000540977 05/10/06-80041-002 150.00

10. OFFICERS AND DIRECTORS PTD TITLE NAME COLE, DAVID E. STREET ADDRESS 10842 OLD GAINESVILLE ROAD CITY-ST-ZIP JACKSONVILLE, FL 322211910 VD TITLE JANE E. AQUINO NAME STREET ADDRESS 10842 OLD GAINESVILLE ROAD JACKSONVILLE, FL 322211910 CITY-ST-7IP rmr THURSBY, WYNELLE NAME 4061 APPALOOSA RD STREET ADDRESS MIDDLEBURG, FL 32068 CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS

## DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filling 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 regeryer 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 with an address, with all other like empowered changed, or on an attache

CITY-ST-ZIP

DAVID E. COLE, PRESIDENT AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR