2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 407248

Entity Name: J. KINSON COOK, INCORPORATED

FILED Mar 19, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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2252 KILLEARN CENTER BLVD 2252 KILLEARN CENTER BLVD

SUITE 2A SUITE 2A

TALLAHASSEE, FL 323083577 US TALLAHASSEE, FL 323093577 US

Current Mailing Address: New Mailing Address:

2252 KILLEARN CENTER BLVD
SUITE 2A
2252 KILLEARN CENTER BLVD
SUITE 2A
2252 KILLEARN CENTER BLVD

TALLAHASSEE, FL 323083577 US TALLAHASSEE, FL 323093577 US

FEI Number: 59-1425616 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BARRETT, DAVID A

BARRETT, DAVID A

111 SOUTH MONROE STREET, SUITE 3000 111 SOUTH MONROE STREET, SUITE 3000

P O BOX 930 TALLAHASSEE, FL 32301 U TALLAHASSEE, FL 32301 US

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: 03/19/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDS () Delete Title: () Change () Addition

 Name:
 COOK, DIANA D
 Name:

 Address:
 2252 KILLEARN CENTER STE 2A
 Address:

 City-St-Zip:
 TALLAHASSEE, FL 32309
 City-St-Zip:

Title: DVP () Delete Title: () Change () Addition

 Name:
 COOK, DIANA D
 Name:

 Address:
 2252 KILLEARN CENTER BLVD. STE. 2A
 Address:

 City-St-Zip:
 TALLAHASSEE, FL 32309
 City-St-Zip:

Title: DVP () Delete Title: DVP (X) Change () Addition

 Name:
 COOK, KINSON J JR
 Name:
 COOK, KINSON J JR

 Address:
 440 CAPITAL CIRCLE, N.W.
 Address:
 4869 LAKE PARK DR.

 City-St-Zip:
 TALLAHASSEE, FL 32304
 City-St-Zip:
 TALLAHASSEE, FL 32311

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: J. KINSON COOK, JR DVP 03/19/2007