

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Matham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **F94000002749 (9)**

1. Corporation Name

J. W. COLE AND SONS, INC.



Principal Place of Business

**6500 MT. ELLIOTT
DETROIT MI 48211**

Mailing Address

**6500 MT. ELLIOTT
DETROIT MI 48211**

2. Principal Place of Business

21 State, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 State, Apt. #, etc.

27 City & State

28 Zip

29 Country

9. Name and Address of Current Registered Agent

**COLE, JAMES W
351 PRODUCTION BLVD.
NAPLES FL 33942**

3. Date Incorporated or Qualified

05/25/1994

3a. Date of Last Report

02/08/1995

4. FEIN Number

38-1722066

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes. ☒ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0602 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 607.0605, Florida Statutes.

SIGNATURE

Signature of Registered Agent

DATE

12. OFFICERS AND DIRECTORS

12.1 NAME	CD	☐ DELETE
12.2 STREET ADDRESS	COLE, JAMES W. 2207 KING LAKE BLVD. NAPLES FL	
12.3 CITY, ST, ZIP	PD	☐ DELETE
12.4 NAME	COLE, JAMES W. J	
12.5 STREET ADDRESS	508 S. MARKET MARINE CITY MI	
12.6 CITY, ST, ZIP	V	☒ DELETE
12.7 NAME	GOEDDEKE, GEORGE S	
12.8 STREET ADDRESS	1227 PINECREST DRIVE WHITE LAKE MI	
12.9 CITY, ST, ZIP	V	☐ DELETE
12.10 NAME	COLE, JON	
12.11 STREET ADDRESS	2207 KING LAKE BLVD. NAPLES FL	
12.12 CITY, ST, ZIP	V	☐ DELETE
12.13 NAME	MCCARTY, DANIEL	
12.14 STREET ADDRESS	12880 NATHALINE REDFORD MI 48239	
12.15 CITY, ST, ZIP	V	☐ DELETE
12.16 NAME	COBB, JAMES	
12.17 STREET ADDRESS	126 PALMETTO DUNES CIRCLE NAPLES FL 33962	
12.18 CITY, ST, ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE	V	☐ Change ☒ Addition
13.2 NAME	Malcolm L. Smith	
13.3 STREET ADDRESS	8825 Harvey Ave.	
13.4 CITY, ST, ZIP	Livonia, MI 48150	
13.5 TITLE	V	☐ Change ☒ Addition
13.6 NAME	Timothy Daly	
13.7 STREET ADDRESS	6637 King Street	
13.8 CITY, ST, ZIP	Chino, CA 91710	
13.9 TITLE		☐ Change ☐ Addition
13.10 NAME		
13.11 STREET ADDRESS		
13.12 CITY, ST, ZIP		☐ Change ☐ Addition
13.13 TITLE		
13.14 NAME		
13.15 STREET ADDRESS		
13.16 CITY, ST, ZIP		☐ Change ☐ Addition
13.17 TITLE		
13.18 NAME		
13.19 STREET ADDRESS		
13.20 CITY, ST, ZIP		

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 attached sheet with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1.30.96

313-921-8200

CR2E034 (12/95)