

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H99234

FILED
Mar 09, 2006
Secretary of State

Entity Name: COLONIAL INVESTMENT CORP.

Current Principal Place of Business:

523 SO. ELLIS ROAD
JACKSONVILLE, FL 32254

New Principal Place of Business:

Current Mailing Address:

523 SO. ELLIS ROAD
JACKSONVILLE, FL 32254

New Mailing Address:

FEI Number: 59-2747033

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JEFFORDS, LEON K.
523 S. ELLIS ROAD
JACKSONVILLE, FL 32254 US

Name and Address of New Registered Agent:

BALDWIN, DEBRA J
523 S. ELLIS ROAD
JACKSONVILLE, FL 32254 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: DEBRA JEAN BALDWIN

03/09/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: COBB, TAMI L
Address: 6721 ARQUES RD.
City-St-Zip: JAX, FL 32205

Title: P () Delete
Name: MAXWELL COBB,
Address: 6721 ARQUES ROAD
City-St-Zip: JAX, FL 32205

Title: S (X) Delete
Name: DEBRA J. JEFFORDS,
Address: 5117 DIVEN DRIVE
City-St-Zip: JACKSONVILLE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: P, S (X) Change () Addition
Name: MAXWELL COBB,
Address: 6721 ARQUES ROAD
City-St-Zip: JAX, FL 32205

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MAXWELL S. COBB

P, S

03/09/2006

Electronic Signature of Signing Officer or Director

Date