

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

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # K85945

(9)

1. Corporation Name

C.O.L., INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 17 PM 3:19

Principal Place of Business

Mailing Address

~~NEIL G. KIEFER, ESQUIRE~~
~~100 2ND AVE S #400N~~
~~ST PETERSBURG FL 33701~~
US

~~GARGANO, ANTHONY J.~~
~~1520 ROYAL PALM SQUARE BLVD. STE. 260~~
~~FT. MYERS FL 33919~~
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 05/05/1989	3a. Date of Last Report 06/30/1994
4. FEI Number 65-0116865	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	

2. Principal Place of Business	2a. Mailing Address
21. 5975 N FEDERAL HIGHWAY Suite, Apt. #, etc.	26. 4411 CLEVELAND AVE Suite, Apt. #, etc.
22. City & State FT LAUDERDALE FL	27. City & State FT MYERS FL
23. Zip 33309	28. Zip 33901
25. Country US	30. Country US

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KIEFER, NEIL G. ESQUIRE
100 2ND AVENUE SOUTH
#400N
ST PETERSBURG FL

81. Name ANTHONY J. GARGANO
82. Street Address (P.O. Box Number is Not Acceptable) 1520 ROYAL PALM SQUARE BLVD
83. Suite, Apt. #, etc. SUITE 260
84. City FT. MYERS
85. Zip Code FL 33919

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: Anthony J. Gargano Reg. Agent DATE: 2/14/95

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE OFF	LAGESCHULTE, DAVID L. 2644 SHRIVER DR. FT MYERS FL	1.1 TITLE C.E.O./D	☐ Change ☐ Addition
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE OFF	LYNCH, PAUL W. 5745 SANDPIPER PLACE FT MYERS FL	2.1 TITLE T/S/D	☐ Change ☐ Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE DS	BRAWNER, TERRY K. 1499 LARKSPUR FT MYERS FL	3.1 TITLE P/D	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE D	REGNIER, DALE 981 WITTMAN FT MYERS FL	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE D	KLINGENSMITH, KIT A. 6723 PLANTATION MANOR LOOP FT MYERS FL	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(9)(k), Florida Statutes. I further certify 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, changed, or on an attachment with an address.

SIGNATURE: Paul W. Lynch DATE: 2/13/95 813-275-6334

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Signature