## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # L53818

1. Entity Name COLE'S STARTERS AND ALTERNATORS, INC.



Principal Place of Business C/O DONALD R. COLE 9540 47TH AVENUE NORTH ST. PETERSBURG, FL 33708 Mailing Address

C/O DONALD R. COLE 9540 47TH AVENUE NORTH ST. PETERSBURG, FL 33708

## FILED Apr 02, 2008 8:00 am Secretary of State

04-02-2008 90019 028 \*\*\*150.00



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No Chg-P

CR2E034 (11/05)

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4. FEI Number 59-2994080		Applied For Not Applicable
5. Certificate of Status Desired	0	\$8.75 Additional

6. Name and Address of Current Registered Agent

COLE, RONALD R 9540 47TH AVENUE NORTH ST. PETERSBURG, FL 33708 AHENTION! RONALD COLE IS DECIESED.

DO NOT WRITE IN THIS SPACE

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the plants of registered agent.	urpose of changing its re	gistered office or registered agent, or both	n, in the State of Florida, I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and title	f applicable. (NOTE: Re	egistered Agent signature required when reinstating)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	9. Election Campaign Trust Fund Contribu		
10.	OFFICERS AND DIREC	CTORS -		
TITLE	P			
NAME	COLE, DONALD R			
STREET ADDRESS	9540 47TH AVENUE NO.			
CITY-ST-ZIP	ST. PETERSBURG, FL			
TITLE	ST			
NAME	COLE, BETTY			S. C. Santana
STREET ADDRESS	5000 49TH AVENUE NORTH			
CITY-ST-ZIP	ST. PETERSBURG, FL 33709			
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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 receiver 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF

DONALD R. COLE 3-15-8

Daytime Phone i

727 396-273

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

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DOCUMENT # L53818 1. Entity Name											
COLE'S	LE'S STARTERS AND ALTERNATORS, INC.										
Principal Place of Business Mailing Address					·						
C/O DONALD R. COLE C/O DO 9540 47TH AVENUE NORTH 9540 47		DONALD R. COI 0 47TH AVENUE PETERSBURG FL	NORTH								
2. Principal Place of Business - No P.Q. Box # 3. Mailing Address							OSII SCEN PIEN EISE	BIES BIGHISE S			
Suite, Apt. #, etc. Suite, Apt. #, etc.			-			1st MOORE CR2E034 (10/07)					
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Zφ	}	Country	Zp	1	Cour	itry	5. Certificat	e of Status Desired [		5 Addition: equired	al
	6. Name	and Address of Current	Register	ed Agent	1	· · · · · · · · · · · · · · · · · · ·	7. Nome an	d Address of New Regis		_ <u>-</u>	
COLE, RONALD R 9540 47TH AVENUE NORTH ST. PETERSBURG FL 33708			<del>-</del> -	Name DONALD COLF Street Address (P.O. Box Number is Not Acceptable)  9540 47 <sup>th</sup> Ave North							
						City S †	Peter	Shuna	FL	3337	08
8. The above	named entity tions of registe	submits this statement for	ir the purp	ose of changing (i	s registen	ad office or regis	stered agent, or o	oin, in the State of Florida	l am familio	with, and a	accept
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13. I hereby certify that the information supplied with this filing does not quality for the exemptions contained in Section 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 effect or director of the corporation or the receiver or fursited empowered to execute this report as required by Chapter 607. Florida Statutes: and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like employments.											
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