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Jun 04 1998 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1998

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



DOCUMENT # L80658 (2)
1. Corporation Name
C.L. COLE & ASSOCIATES, INC.



Principal Place of Business Mailing Address
4711 A N DIXIE HWY. 196 SCENE-A-RAMA DR.
FT. LAUDERDALE FL 33334 BOONE, N.C. BOONE, N.C.
US 28607 US 28607

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2a. Mailing Address
21 196 SCENE-A-RAMA 26 196 SCENE-A-RAMA DR.
Suite, Apt #, etc. Suite, Apt #, etc.
22 BOONE, N.C. 27
City & State City & State
23 Zip 28 28607 30
Country Country

3. Date Incorporated or Qualified
06/11/1990
4. FEI Number 65-0206083 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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
COLE, CYRUS L. COLE, CYRUS L.
4711 A N DIXIE HWY. 196 SCENE-A-RAMA
FT. LAUDERDALE FL 33334 BOONE, N.C.
28607

10. Name and Address of New Registered Agent
81 Name D. BRENT TINGLER
82 Street Address (P.O. Box Number is Not Acceptable)
4820 N.E. 26 AVE.
83
84 City FORT LAUDERDALE FL 85 Zip Code 33308

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 to the Florida Department of State, Division of Corporations, for the purpose of changing its registered agent to:

SIGNATURE D. BRENT TINGLER, CPA. 5/27/98
Signature of the person authorized to execute this statement (Required for all corporations except those which are exempt from filing this statement)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	☐ Change ☐ Addition
NAME	COLE, CYRUS L.	1.2 NAME	
STREET ADDRESS	1831 NE 54TH STREET	1.3 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL BOONE, N.C.	1.4 CITY-ST-ZIP	
TITLE	D	2.1 TITLE	☐ Change ☐ Addition
NAME	MCGUGIN, DIANE G.	2.2 NAME	
STREET ADDRESS	4831 NE 54TH STREET	2.3 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL BOONE, N.C.	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		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 hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 addition page with address.

CR2E034 (10/97)