

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005265

FILED
Jan 07, 2004
Secretary of State**Entity Name:** COLURE DEVELOPMENTS, INC.**Current Principal Place of Business:**1301 RIVERPLACE BOULEVARD
SUITE 1500
JACKSONVILLE, FL 32207**New Principal Place of Business:****Current Mailing Address:**1301 RIVERPLACE BOULEVARD
SUITE 1500
JACKSONVILLE, FL 32207**New Mailing Address:****FEI Number:** 20-0109826**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**CURLEY, CHARLES R JR.
1301 RIVERPLACE BOULEVARD
SUITE 1500
JACKSONVILLE, FL 32207**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** DT () Delete
Name: DUCLOSE, MIKE
Address: 4401 EMERSON STREET
City-St-Zip: JACKSONVILLE, FL 32207 US**Title:** DP () Delete
Name: BISHOP, BEN
Address: 4401 EMERSON STREET
City-St-Zip: JACKSONVILLE, FL 32207 US**Title:** V () Delete
Name: GULLIFORD, WILLIAM I III
Address: 1805 COPELAND STREET
City-St-Zip: JACKSONVILLE, FL 32204 US**Title:** DS () Delete
Name: STEVENS, DWAIN
Address: 4401 EMERSON STREET
City-St-Zip: JACKSONVILLE, FL 32207 US**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**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 Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM I. GULLIFORD, III

V

01/07/2004

Electronic Signature of Signing Officer or Director

Date