


**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 09, 2006 8:00 am**  
**Secretary of State**


02-09-2006 90025 030 \*\*\*158.75

<b>DOCUMENT # P01000010706</b> 1. Entity Name J. W. COLE & SONS OF FLORIDA, INC.	
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Principal Place of Business 5711 CORPORATION CIRCLE FT MYERS, FL <del>33912</del> 33905	Mailing Address 5711 CORPORATION CIRCLE FT MYERS, FL <del>33912</del> 33905
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**DO NOT WRITE IN THIS SPACE**

40011030



01242006 No Chg-P CR2E034 (11/05)

4. FEI Number 30-0212677	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

COLE, JONATHAN L  
5711 CORPORATION CIRCLE  
FT. MYERS, FL 33912

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

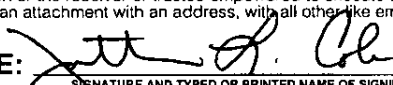
SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTSD COLE, JAMES W JR 6500 MT ELLIOTT DETROIT, MI 48211
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V COLE, JONATHAN L 5711 CORPORATION CIRCLE FORT MYERS, FL 33905
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing 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:  1-28-06 239-694-3400

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #