

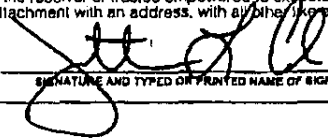


FILED
Mar 14, 2008 08:00 AM
Secretary of State

0000010706			
J. W. COLE & SONS OF FLORIDA, INC.			
Principal Place of Business 5711 CORPORATION CIRCLE FORT MYERS, FL 33905		Mailing Address 5711 CORPORATION CIRCLE FORT MYERS, FL 33905	
DO NOT WRITE IN THIS SPACE			
		01152008 No Chg-P CR2E034 (11/05)	
		4. FEI Number 30-0212677	
		Applied For Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent COLE, JONATHAN L 5711 CORPORATION CIRCLE FORT MYERS, FL 33905		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 _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			
TITLE	PTSD		
NAME	COLE, JAMES W JR		
STREET ADDRESS	6500 MT ELLIOTT		
CITY-ST-ZIP	DETROIT, MI 48211		
TITLE	V		
NAME	COLE, JONATHAN L		
STREET ADDRESS	5711 CORPORATION CIRCLE		
CITY-ST-ZIP	FORT MYERS, FL 33905		
TITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
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: 		JONATHAN L. COLE 1-31-07	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	