

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P01000017198

Entity Name: FAMCOL GROUP, INC.

FILED
Dec 01, 2008
Secretary of State**Current Principal Place of Business:**6900 NE 4TH. LANE
OCALA, FL 34470**New Principal Place of Business:****Current Mailing Address:**6900 NE 4TH. LANE
OCALA, FL 34470**New Mailing Address:**

FEI Number: 59-3703037

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:COLVIN, JAMES E
6900 NE 4TH. LANE
OCALA, FL 34470 US**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: VP () Delete
Name: COLVIN, ROBERT W II
Address: 58 ALMOND ROAD
City-St-Zip: OCALA, FL 34472Title: () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: PRES (X) Change () Addition
Name: COLVIN, JAMES E
Address: 6900 NE 4TH. LANE
City-St-Zip: OCALA, FL 34470Title: VP () Change (X) Addition
Name: COLVIN, ROBERT W II
Address: 53 ALMOND ROAD
City-St-Zip: OCALA, FL 34472

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES E. COLVIN

PRES

12/01/2008

Electronic Signature of Signing Officer or Director

Date