

Amended
2003

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P01000032576**
1. Entity Name
Christmas & Cole, Inc.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 SEP 30 AM 8:16

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
2262 Bear Ln.
Suite, Apt. #, etc.

3. Mailing Address
P.O. Box 307
Suite, Apt. #, etc.

City & State
Julee, FL

City & State
Julee FL

4. FEI Number
59-3707225

Applied For
Not Applicable

Zip
32097

Country
Nassau

Zip
32097

Country
Nassau

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent
Name **C. Roger Christmas**
Street Address (P.O. Box Number is Not Acceptable)
2262 Bear Ln
City **Julee** FL Zip Code **32097**

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 **[Signature]**

(NOTE: Registered Agent signature required when reinstating)
DATE **Sept 26, 2003**

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **President**
NAME **Curtis R. Christmas**
STREET ADDRESS **2262 Bear Ln**
CITY-ST-ZIP **Julee # 32097**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **Vice President**
NAME **Barbara Cole**
STREET ADDRESS **535 Sessions Rd**
CITY-ST-ZIP **Nicholls Ga. 31554**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **Secretary**
NAME **Betty S Brewer**
STREET ADDRESS **2098 Ashlg Ave**
CITY-ST-ZIP **Julee, FL 32097**

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12. 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 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 on an attachment with an address, with all other like empowered.

SIGNATURE: **[Signature]**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date **9-26-03** Daytime Phone # **904-225-0911**

CR2E034B (12/02)