2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000041042

FILED
Jan 20, 2009
Secretary of State

Entity Name: MITCHELL COLE CORPORATION

Current Principal Place of Business:	**New Principal Place of Business:**
110 16TH AVE NW NAPLES, FL 34120	

Current Mailing Address:	**New Mailing Address:**
110 16TH AVE NW NAPLES, FL 34120	

FEI Number: 26-2471158   FEI Number Applied For ( )   FEI Number Not Applicable ( )   Certificate of Status Desired ( )

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
CAMPBELL, J DAVID EA 2511 VASCO ST STE 115 PUNTA GORDA, FL 33950 US	MITCHELL, DORIS L 110 16TH AVE NW NAPLES, FL 34120 US

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: DORIS L MITCHELL   01/20/2009
_____
                Electronic Signature of Registered Agent   Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	

Title:	P, S ( ) Delete	Title:	( ) Change ( ) Addition
Name:	MITCHELL, THOMAS F	Name:	
Address:	110 16TH AVE NW	Address:	
City-St-Zip:	NAPLES, FL 34120	City-St-Zip:	

Title:	V, T ( ) Delete	Title:	( ) Change ( ) Addition
Name:	MITCHELL, DORIS L	Name:	
Address:	110 16TH AVE NW	Address:	
City-St-Zip:	NAPLES, FL 34120	City-St-Zip:	

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: DORIS L MITCHELL   VP   01/20/2009
_____
            Electronic Signature of Signing Officer or Director   Date