

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P950000033107**

1. Corporation Name

COLD SPRINGS FINANCIAL CORPORATION

Principal Place of Business
149 Brock Street
Thamesford, Ontario
NOM 2M0

Mailing Address
149 Brock Street
Thamesford, Ontario
NOM 2M0

3. Date Incorporated or Qualified April 26, 1995	3a. Date of Last Report
4. FEI Number	Applied For <input checked="" type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

21. Principal Place of Business	2a. Mailing Address
22. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
23. City & State	27. City & State
24. Zip	28. Zip
25. Country	29. Country
24. Zip	30. Country

9. Name and Address of Current Registered Agent

Oswald, Douglas H.
21 Northeast First Avenue
Ocala, Florida
34470

10. Name and Address of New Registered Agent

81. Name	85. Zip Code
82. Street Address (P.O. Box Number is Not Acceptable)	FL
83.	
84. City	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered officer or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and the corporation

Name of Registered Agent signed and prepared with registration

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Braley, Gary E.	1.2 NAME	
STREET ADDRESS	149 Brock Street	1.3 STREET ADDRESS	
CITY-ST-ZIP	Thamesford, Ontario NOM 2M0	1.4 CITY-ST-ZIP	
TITLE	CD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Leroux, George D.	2.2 NAME	
STREET ADDRESS	149 Brock Street	2.3 STREET ADDRESS	
CITY-ST-ZIP	Thamesford, Ontario NOM 2M0	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Cowan, F. Thomas	3.2 NAME	
STREET ADDRESS	149 Brock Street	3.3 STREET ADDRESS	
CITY-ST-ZIP	Thamesford, Ontario NOM 2M0	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Marling, John	4.2 NAME	
STREET ADDRESS	8911 Tibet Bay Dr.	4.3 STREET ADDRESS	
CITY-ST-ZIP	Orlando, Florida 32819	4.4 CITY-ST-ZIP	
TITLE	VIO	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Brillon, Michel G.	5.2 NAME	
STREET ADDRESS	149 Brock Street	5.3 STREET ADDRESS	
CITY-ST-ZIP	Thamesford, Ontario NOM 2M0	5.4 CITY-ST-ZIP	
TITLE	SO	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Koebel, E. Jane	6.2 NAME	
STREET ADDRESS	149 Brock Street	6.3 STREET ADDRESS	
CITY-ST-ZIP	Thamesford, Ontario NOM 2M0	6.4 CITY-ST-ZIP	

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JTR

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Gary E. Braley
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 24, 1996
DATE

(519) 285-3940
BUSINESS PHONE #

CR2E034 (12/95)