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Secretary of State

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PROFIT CORPORATION ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P96000047299			
1. Corporation Name C.A. COLE & ASSOCIATES, INC.			
Principal Place of Business 80 BEACH DRIVE WEST DESTIN FL 32541		Mailing Address 80 BEACH DRIVE WEST DESTIN FL 32541 US	
2. Principal Place of Business 21 7053 GANDY DRIVE Suite, Apt. #, etc. 22		2a. Mailing Address 26 P.O. BOX 5988 Suite, Apt. #, etc. 27	
23 City & State NAVARRE, FLORIDA Zip 32566		28 City & State NAVARRE, FLORIDA Zip 32566	
25 SANTA ROSA		30 SANTA ROSA	
9. Name and Address of Current Registered Agent COLE, THORNTON 80 BEACH DRIVE WEST DESTIN FL 32541		10. Name and Address of New Registered Agent 81 Name COLE, THORNTON 82 Street Address (P.O. Box Number is Not Acceptable) 7053 GANDY DRIVE 83 84 City NAVARRE FL 85 Zip Code 32566	
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 office 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 <u>Thornton E. Cole</u> THORNTON E. COLE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD COLE, CAROLE 80 BEACH DRIVE WEST DESTIN FL 32541	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	PRESIDENT COLE CAROLE 7053 GANDY DRIVE NAVARRE FL 32566
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S COLE, THORNTON E 80 BEACH DRIVE WEST DESTIN FL 32541	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	V.P. SECRETARY & TREASURER COLE, THORNTON E. 7053 GANDY DRIVE NAVARRE, FL. 32566
TITLE NAME STREET ADDRESS CITY-ST-ZIP		3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)