## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P97000061378

Entity Name: COTLE, INC

City-St-Zip:

FORT MYERS, FL 33919

FILED Feb 09, 2009 Secretary of State

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Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
SUITE 115	9 CORPORAT 5 ERS, FL 3391				
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
C/O 6309 CORPORATE COURT SUITE 115 FT. MYERS, FL 33919			C/O 6309 CORPORATE COURT SUITE 115 FORT MYERS, FL 33919		
FEI Number	: 65-0771342	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
SUITE 115	PORATE COL				
The above in the State	named entity e of Florida.	submits this statement for the	purpose of changing its registere	ed office or registered agent, or both,	
SIGNATU	RE:				
Electronic Signature of Registered Agent			ent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PASEV, SPAS	) Delete RATE COURT SUITE 115 FL 33919	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SVOBODOVA,	RATE COURT SUITE 115	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address:	KRPALEK, DAI	) Delete NIEL RATE COURT SUITE 115	Title: Name: Address:	( ) Change ( ) Addition	

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.

City-St-Zip:

SIGNATURE: RICHARD A DONNER CPA 02/09/2009