

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 02, 2004 8:00 am
Secretary of State

03-02-2004 90030 044 ***150.00

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1. Entity Name
CFP CORP.



Principal Place of Business
1102 BEN FRANKLIN DR
307
SARASOTA, FL 34236

Mailing Address
1102 BEN FRANKLIN DR
307
SARASOTA, FL 34236

94023307



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01272004

Chg-P

CR2E034 (10/03)

4. FEI Number

65-0902597

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

COLE, VERNON J
1102 BEN FRANKLIN DR. APT. 307
SARASOTA, FL 34236

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution: ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D ☒ Delete
NAME COLE, VERNON J
STREET ADDRESS 1102 BEN FRANKLIN DR. APT. 307
CITY-ST-ZIP SARASOTA, FL 34236

TITLE D ☒ Delete
NAME COLE, SARA W
STREET ADDRESS 1102 BEN FRANKLIN DR. APT. 307
CITY-ST-ZIP SARASOTA, FL 34236

TITLE D ☐ Delete
NAME COLE, CHARLES D
STREET ADDRESS 1104 FONTAINE RD.
CITY-ST-ZIP LEXINGTON, KY 40502

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D/S/T ☐ Change ☒ Addition
NAME Belva Cole Collins
STREET ADDRESS 2377 The Woods Lane
CITY-ST-ZIP Lexington, Kentucky 40502

TITLE D ☐ Change ☒ Addition
NAME Philip V. Cole
STREET ADDRESS 420 Northwest 11th Avenue, No. 618
CITY-ST-ZIP Portland, Oregon 97209

TITLE D ☐ Change ☒ Addition
NAME Elizabeth A. Cole
STREET ADDRESS 1036 Ray Street
CITY-ST-ZIP Maryville, Tennessee 37803

TITLE D/P ☒ Change ☐ Addition
NAME Charles D. Cole
STREET ADDRESS 1104 Fontaine Road
CITY-ST-ZIP Lexington, Kentucky 40502

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 Block 11 if changed, or on an attachment with an address, with all other like empowered:

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Charles D. Cole 2/23/04

(859) 255-8581