## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P99000012957

City-St-Zip: GAINESVILLE, FL 32605

Entity Names C & L CODDODATION OF CAIN

FILED Mar 16, 2004 Secretary of State

Entity Nai	me: C&LCO	RPORATION OF GAINESVILI	LE		
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	34TH STREET LLE, FL 32605				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
THE FRAM	34TH STREET ME SHOPPE LLE, FL 32605	;			
FEI Number:	: 59-3566252	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of C	urrent Registered Agent:	Name and Address o	f New Registered Agent:	
2616 NW ( GAINESVI	TON, CYNTHIA	5 US	ournose of changing its registere	d office or registered agent, or both.	
	e of Florida.	submits this statement for the p	ourpose of changing its registered	d office of registered agent, or both,	
SIGNATU	RE:				
	Electron	ic Signature of Registered Age	ent	Date	
Election Car	mpaign Financing	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	HARRINGTON,	EST 52 AVENUE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address:	COHEN, LAURA	Delete \ L EST 52 AVENUE	Title: Name: Address:	( ) Change ( ) Addition	

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: CYNTHIA A HARRINGTON P 03/16/2004