
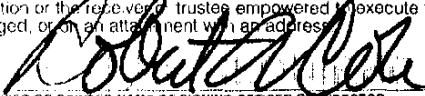


FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Apr 04 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS																											
DOCUMENT # S05330 (3) 1. Corporation Name COLE, STONE, WHITAKER & STOUDEMIRE, INC.																													
Principal Place of Business 76 SOUTH LAURA SUITE 1700 JACKSONVILLE FL 32202		Mailing Address 76 SOUTH LAURA SUITE 1700 JACKSONVILLE FL 32202-3411																											
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country																											
24		25																											
29		30																											
9. Name and Address of Current Registered Agent COLE ROBERT A 76 S LAURA ST STE 1700 JACKSONVILLE FL 32202		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code																											
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____																													
12. OFFICERS AND DIRECTORS <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"> DP COLE, ROBERT A. 76 S LAURA ST, STE 1700 JACKSONVILLE FL </td> <td style="width: 50%; text-align: right;"> <input type="checkbox"/> DELETE </td> </tr> <tr> <td> DS STONE, WILLIAM T. 76 S LAURA ST, STE 1700 JACKSONVILLE FL </td> <td style="text-align: right;"> <input type="checkbox"/> DELETE </td> </tr> <tr> <td> DT STOUDEMIRE, RICHARD M. 76 S LAURA ST, STE 1700 JACKSONVILLE FL </td> <td style="text-align: right;"> <input type="checkbox"/> DELETE </td> </tr> <tr> <td> </td> <td style="text-align: right;"> <input type="checkbox"/> DELETE </td> </tr> <tr> <td> </td> <td style="text-align: right;"> <input type="checkbox"/> DELETE </td> </tr> <tr> <td> </td> <td style="text-align: right;"> <input type="checkbox"/> DELETE </td> </tr> <tr> <td> </td> <td style="text-align: right;"> <input type="checkbox"/> DELETE </td> </tr> </table>		DP COLE, ROBERT A. 76 S LAURA ST, STE 1700 JACKSONVILLE FL	<input type="checkbox"/> DELETE	DS STONE, WILLIAM T. 76 S LAURA ST, STE 1700 JACKSONVILLE FL	<input type="checkbox"/> DELETE	DT STOUDEMIRE, RICHARD M. 76 S LAURA ST, STE 1700 JACKSONVILLE FL	<input type="checkbox"/> DELETE		<input type="checkbox"/> DELETE		<input type="checkbox"/> DELETE		<input type="checkbox"/> DELETE		<input type="checkbox"/> DELETE	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"> 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP </td> <td style="width: 50%; text-align: right;"> <input type="checkbox"/> Change <input type="checkbox"/> Addition </td> </tr> <tr> <td> 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP </td> <td style="text-align: right;"> <input type="checkbox"/> Change <input type="checkbox"/> Addition </td> </tr> <tr> <td> 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP </td> <td style="text-align: right;"> <input type="checkbox"/> Change <input type="checkbox"/> Addition </td> </tr> <tr> <td> 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP </td> <td style="text-align: right;"> <input type="checkbox"/> Change <input type="checkbox"/> Addition </td> </tr> <tr> <td> 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP </td> <td style="text-align: right;"> <input type="checkbox"/> Change <input type="checkbox"/> Addition </td> </tr> <tr> <td> 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP </td> <td style="text-align: right;"> <input type="checkbox"/> Change <input type="checkbox"/> Addition </td> </tr> </table>		1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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14. I do 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 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, 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: 		Robert A. Cole 3-31-97 904-353-9664																											



CR2E034 (9/96)