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FILED  
Apr 30 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 # **V20542** (9)  
1. Corporation Name  
**COOLEY/ROJAS ENTERPRISES, INC.**

Principal Place of Business

**27341 GOLF COURSE LP  
WESLEY CHAPEL FL 33541  
US**

Mailing Address

**27341 GOLF COURSE LP  
WESLEY CHAPEL FL 33544-3704  
US**



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>03/12/1992</b>	3a. Date of Last Report <b>04/23/1996</b>
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number <b>59-3109776</b>	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
23	Zip	28	Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
24	Country	29	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**COOLEY, KAREN C.  
27341 GOLF COURSE LOOP  
WESLEY CHAPEL FL 33544**

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
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 *[Signature]* (NOTE: Registered Agent signature required when reinstating) DATE *[Date]*

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COOLEY, MICHAEL J.	1.2 NAME	
STREET ADDRESS	27341 GOLF COURSE LOOP	1.3 STREET ADDRESS	
CITY-ST-ZIP	WESLEY CHAPEL FL	1.4 CITY-ST-ZIP	
TITLE	VD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROJAS, NEREO G.	2.2 NAME	
STREET ADDRESS	5315 WESLEY CHAPEL LOOP	2.3 STREET ADDRESS	
CITY-ST-ZIP	WESLEY CHAPEL FL	2.4 CITY-ST-ZIP	
TITLE	SD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COOLEY, KAREN C.	3.2 NAME	
STREET ADDRESS	27341 GOLF COURSE LOOP	3.3 STREET ADDRESS	
CITY-ST-ZIP	WESLEY CHAPEL FL	3.4 CITY-ST-ZIP	
TITLE	TD	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COOLEY, LINDA M.	4.2 NAME	
STREET ADDRESS	5315 WESLEY CHAPEL LOOP	4.3 STREET ADDRESS	
CITY-ST-ZIP	WESLEY CHAPEL FL	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 or 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 changes, or on an attachment with an address.

SIGNATURE: *[Signature]* **KAREN C. COOLEY** 3-8-97 (813) 973-1560  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)