2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 04, 2009
Secretary of State

DOCUMENT# V64930

Entity Name: COLE ENTERPRISES, LTD., INC.

Current Principal Place of Business:

11710 TOM FOLSOM RD
THONOTOSASSA, FL 33592

New Principal Place of Business:

Current Mailing Address:

4935 POND RIDGE DRIVE
RIVERVIEW, FL 33578

New Mailing Address:

11410 BLUE LILAC AVE
RIVERVIEW, FL 33578

FEI Number: 59-3149157 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COLE, ROBERT L SR
11710 TOM FOLSOM ROAD
THONOTOSASSA, FL 33592 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: COLE, ROBERT L SR
Address: 11710 TOM FOLSOM RD
City-St-Zip: THONOTOSASSA, FL 33592

Title: VD ( ) Delete
Name: COLE, MADALYNE
Address: 11710 TOM FOLSOM ROAD
City-St-Zip: THONOTOSASSA, FL 33592

Title: SD ( ) Delete
Name: COLE, TODD D
Address: 4935 POND RIDGE DRIVE
City-St-Zip: RIVERVIEW, FL 33578

Title: SD ( ) Delete
Name: COLE, JAMES
Address: 11710 TOM FOLSOM ROAD
City-St-Zip: THONOTOSASSA, FL 33592

Title: TD ( ) Delete
Name: COLE, ANTHONY J SR
Address: 11710 TOM FOLSOM ROAD
City-St-Zip: THONOTOSASSA, FL 33592

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change ( ) Addition
Name: COLE, MADELYNE
Address: 11710 TOM FOLSOM ROAD
City-St-Zip: THONOTOSASSA, FL 33592

Title: SD (X) Change ( ) Addition
Name: COLE, TODD D
Address: 11410 BLUE LILAC AVE
City-St-Zip: RIVERVIEW, FL 33578

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: TODD D COLE SD 02/04/2009

Electronic Signature of Signing Officer or Director — Date