

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000004921

FILED
Apr 13, 2011
Secretary of State

Entity Name: COX COMMUNICATIONS NCC, INC.

Current Principal Place of Business:

6205 PEACHTREE DUNWOODY ROAD
BARRY.TROTTER2@COXINC.COM
ATLANTA, GA 30319

New Principal Place of Business:

Current Mailing Address:

1400 LAKE HEARN DRIVE
MAILSTOP CP-12 / ATTN: CORP TAX DEPT.
ATLANTA, GA 30319

New Mailing Address:

FEI Number: 58-2164886 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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

OFFICERS AND DIRECTORS:

Title: D
Name: SPALDING, JOHN P
Address: 6205 PEACHTREE DUNWOODY RD.
City-St-Zip: ATLANTA, GA 30328

Title: D
Name: BOWSER, MARK F
Address: 6205 PEACHTREE DUNWOODY RD.
City-St-Zip: ATLANTA, GA 30328

Title: PD
Name: ESSER, PATRICK J
Address: 6205 PEACHTREE DUNWOODY RD.
City-St-Zip: ATLANTA, GA 30328

Title: VP
Name: FRIEDMAN, MARIA
Address: 6205 PEACHTREE DUNWOODY RD.
City-St-Zip: ATLANTA, GA 30328

Title: S
Name: MUHL, SHUANA S
Address: 6205 PEACHTREE DUNWOODY RD.
City-St-Zip: ATLANTA, GA 30328

Title: TV
Name: COKER, SUSAN
Address: 6205 PEACHTREE DUNWOODY RD.
City-St-Zip: ATLANTA, GA 30328

I hereby 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 all other like empowered.

SIGNATURE: MARIA FRIEDMAN

VP

04/13/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date