2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000080832

Entity Name: J. B. COXWELL CONTRACTING, INC.

FILED Mar 24, 2009 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
	O ROAD WES 'ILLE, FL 322					
Current Mailing Address:			New Mailir	New Mailing Address:		
6741 LLOYD ROAD WEST JACKSONVILLE, FL 32254						
FEI Number: 5	59-3666875	FEI Number Applied For ()	El Number Not Appli	clicable () Certificate of Status Desired (X)		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent						
AKEL, DANIEL D ONE INDEPENDENT DRIVE SUITE 2301 JACKSONVILLE, FL 32202 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both,						
in the State						
SIGNATUR		c Signature of Registered Agent		 Date		
Election Campaign Financing Trust Fund Contribution ().						
OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:						
Title: Name: Address: City-St-Zip:		Delete IN D D	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	D () COXWELL, JOH 9433 COXWELI JACKSONVILLE	LANE	Title: Name: Address: City-St-Zip:	D (X) Change () Addition COXWELL, JOHN B 3480 OTIS ROAD JACKSONVILLE, FL 32220		
Title: Name: Address: City-St-Zip:	STD () WILLIFORD, V \ 9410 COXWELL JACKSONVILLE	LANE	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	EVP () MOUSA, SAM E 8620 HUNTERS JACKSONVILLE	CREEK DRIVE SOUTH	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	VP () KAYSER, THOM 6746 RIVERFRO JACKSONVILLE	ONT CREST	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	VP () KNAPP, PATRIC 8107 SARCEE I JACKSONVILLE	RAIL	Title: Name: Address: City-St-Zip:	() Change () Addition		

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: V WAYNE WILLIFORD S 03/24/2009