

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 17, 2004 8:00 am
Secretary of State

03-17-2004 90017 014 ***158.75

DOCUMENT # P03000056060
 1. Entity Name
 COX BUILDING CORPORATION



Principal Place of Business Mailing Address
 12318 PANAMA CITY BEACH PARKWAY 12318 PANAMA CITY BEACH PARKWAY
 PANAMA CITY, FL 32407 PANAMA CITY, FL 32407

14000287



2. Principal Place of Business 3. Mailing Address
 17687 Ashley Drive Po Box 9088
 Suite, Apt. #, etc. Suite, Apt. #, etc.

02112004 Chg-P CR2E034 (10/03)

City & State Panama City Bch, Fl City & State Panama City Bch, Fl
 4. FEI Number 63-0544071 Applied For Not Applicable
 Zip 32413 Country Zip 32417 Country
 5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent
 HARE, DIANE CPA Name Diane C. Hare CPA
 3003 SOUTH HIGHWAY 77 Street Address (P.O. Box Number is Not Acceptable)
 LYNN HAVEN, FL 32444 2589 Jenks Ave.
 City Panama City FL Zip Code 32405

8. 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. I am familiar with, and accept the obligations of registered agent.
 SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00
 9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE D	COX, RICHARD L JR. <input type="checkbox"/> Delete 12318 PANAMA CITY BEACH PARKWAY PANAMA CITY, FL 32407	TITLE D	Richard Cox, Jr. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Po Box 9088 Panama City Bch, Fl 32417
TITLE NAME		TITLE NAME	

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Richard L. Cox JR 3-15-04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #