2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 09, 2009
Secretary of State

DOCUMENT# F08000002613

Entity Name: COX WIRELESS, INC.

Current Principal Place of Business:

1400 LAKE HEARN DRIVE
ATLANTA, GA 30319

New Principal Place of Business:

Current Mailing Address:

1400 LAKE HEARN DRIVE
ATLANTA, GA 30319

New Mailing Address:

FEI Number: 20-4822919 **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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: S ( ) Delete
Name: MERDEK, ANDREW A
Address: 6205 PEACHTREE DUNWOODY DRIVE
City-St-Zip: ATLANTA, GA 30328

Title: VP ( ) Delete
Name: BARNETT, PRESTON B
Address: 6205 PEACHTREE DUNWOODY DRIVE
City-St-Zip: ATLANTA, GA 30328

Title: T ( ) Delete
Name: COKER, SUSAN W
Address: 6205 PEACHTREE DUNWOODY DRIVE
City-St-Zip: ATLANTA, GA 30328

Title: PD ( ) Delete
Name: HATCHER, JAMES A
Address: 1400 LAKE HEARN DRIVE
City-St-Zip: ATLANTA, GA 30319

Title: D ( ) Delete
Name: ESSER, PATRICK J
Address: 1400 LAKE HEARN DRIVE
City-St-Zip: ATLANTA, GA 30319

Title: D ( ) Delete
Name: BOWSER, MARK F
Address: 1400 LAKE HEARN DRIVE
City-St-Zip: ATLANTA, GA 30319

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change ( ) Addition
Name: FRIEDMAN, MARIA
Address: 6205 PEACHTREE DUNWOODY DRIVE
City-St-Zip: ATLANTA, GA 30328

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

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

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: MARIA FRIEDMAN VP 03/09/2009

Electronic Signature of Signing Officer or Director Date