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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

... CORPORATION  
ANNUAL REPORT  
1995

FLORIDA DEPARTMENT OF STATE  
Sandra B. Northam  
Secretary of State  
DIVISION OF CORPORATIONS



DOCUMENT # 267766 (4)

1. Corporation Name  
COX LUMBER CO.

Principal Place of Business Mailing Address  
3300 FAIRFIELD AVE. S. 3300 FAIRFIELD AVE. S.  
ST PETERSBURG FL 33712 ST PETERSBURG FL 33712

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 03/07/1963 3a. Date of Last Report 04/25/1994

4. FEI Number 59-0999516 Applied For Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 189.032, Florida Statutes  Yes  No

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip Country 28 Zip Country

24 25 29 30

9. Name and Address of Current Registered Agent

BRANDES, RUSSEL P.  
3300 FAIRFIELD AVE SO.  
ST PETERSBURG FL 33712

10. Name and Address of New Registered Agent

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

Signature, typed or printed name of registered agent and this if applicable. (NOTE: Registered Agent signature required when re-registering)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CD	1.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	TIBBETTS, LINTON N.	1.2 NAME	BLOCK, CHARLES
STREET ADDRESS	2928 68TH AVE. S.	1.3 STREET ADDRESS	17383 KENNEDY DR.
CITY-ST-ZIP	ST. PETERSBURG FL	1.4 CITY-ST-ZIP	N. REDINGTON BCH, FL <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE	PD	2.1 TITLE	V/D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	FEHR, ROBERT E.	2.2 NAME	HOKER, DONNA E.
STREET ADDRESS	12322 OAKS LANE	2.3 STREET ADDRESS	2900 WINN-MOR, CLARKSVILLE, TN
CITY-ST-ZIP	SEMOLE FL	2.4 CITY-ST-ZIP	
TITLE	SD	3.1 TITLE	V/D/ASST. SEC <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	TIBBETTS, PAULINE E.	3.2 NAME	BRANDES, MARY L.
STREET ADDRESS	2928 68TH AVE. S.	3.3 STREET ADDRESS	729 SUWANNEE CT. NE
CITY-ST-ZIP	ST. PETERSBURG FL	3.4 CITY-ST-ZIP	ST. PETERSBURG, FL <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE	VD	4.1 TITLE	D/V/T <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	TIBBETTS, DANIEL E.	4.2 NAME	BRANDES, RUSSEL P.
STREET ADDRESS	363 PINELLAS BAYWAY #31	4.3 STREET ADDRESS	729 SUWANNEE CT. NE
CITY-ST-ZIP	TIERRA VERDE FL	4.4 CITY-ST-ZIP	ST. PETERSBURG, FL <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE	D V	5.1 TITLE	V/D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	TIBBETTS, DAVID N.	5.2 NAME	QUESADA, JUAN B.
STREET ADDRESS	8300 OLD FLORAL CTY RD S	5.3 STREET ADDRESS	9620 59TH AVE.N. ST. PETERSBURG, FL
CITY-ST-ZIP	INVERNESS FL	5.4 CITY-ST-ZIP	
TITLE	VD	6.1 TITLE	V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	TILLIS, ARLIN E.	6.2 NAME	MAHER, JOHN M.
STREET ADDRESS	621 N RIVER RD.	6.3 STREET ADDRESS	1045 N. FAN PALM PT.
CITY-ST-ZIP	NEW PT. RICHEY FL	6.4 CITY-ST-ZIP	CRYSTAL RIVER, FL

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption under Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 007, Florida Statutes; and that my name appears in Block 12 or Block 13, if changed, or on an amendment with an addressee.

SIGNATURE: Russel P. Brandes Exec. V/Pres 4-25-95 813-327-4583

SIGNATURE AND TYPE OR PRINTED NAME OF BOILING OFFICER OR DIRECTOR Date (Print Name #)

267760



**COX**

**LUMBER CO.**

3300 FAIRFIELD AVENUE SO. • ST. PETERSBURG, FLORIDA 33712-1899

TELEPHONE  
(813) 327-4500  
FAX  
(813) 327-8383

CORPORATION ANNUAL REPORT 1995 - BLOCK #13 CONTINUED  
FEDERAL I.D. #59-0999516

<u>NAME</u>	<u>TITLE</u>	<u>STREET ADDRESS</u>	<u>CITY AND STATE</u>
SHETLER, JOSPEH	V	2617 CARTER GROVE CIR	WINDERMERE, FL

RPB/SLW

4/11/95

