## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 310916

(2)

COX OIL AND SALES COMPANY

FILED
Feb 26 1997 8:00am
Secretary of State

11/10/1986         2. Principal Prace of Business       28. Mailing Address       4. FEI Number         21       25       59-11625         Suite, Apt. #, etc.       5. Certificate of 3         22       27       5. Certificate of 3         City & State       City & State       6. Election Camp	rated or Qualified		
US         US         3. Date Incorpor 11/10/1986           2. Principal Place of Business         2a. Mailing Address         4. FEI Number           21         25         59-11625           Suite, Apt. #, etc         Suite, Apt. #, etc.         5. Certificate of 2           22         27         6. Election Camp           City & State         City & State         6. Election Camp	rated or Qualified		
21         26         59-11625           Suite, Apt. #, etc         Suite, Apt. #, etc.         5. Certificate of 2           22         27         City & State         6. Election Camp	3. Date Incorporated or Qualified 11/10/1966 3a. Date of Last Report 02/16/1996		
Suite, Apt. #, etc         Suite, Apt. #, etc.         5. Certificate of 3           22         City & State         City & State         6. Election Camp			Applied For
22         27         5. Certificate of section Came           City & State         City & State         6. Election Came			Not Applicable
	5. Certificate of Status Desired See Required \$8.75 Additional Fee Required		
Trust Cond Co	6. Election Campaign Financing \$5.00 May Be		00 May Be
	Trust Fund Contribution Added to Fees		
	ion has liability for in		∌r s. 199.032,
24 25 29 30 Florida Statut	es L ddress of New Reg	Yes No	
hal N	galess of New Yea	Signalag Wilaur	
COA, CHRISTOPHER P.			
EUSTIS FL 32726	dress (P.O. Box Number is Not Acceptable)		
83			
84 City		FL 85 Z	Zip Code
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of direct agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature typed or profest made of registered agent and too if applicable (NOTE, Registered Agent signature required when reinstating)	ors. I hereby accep	t the appointment	as registered
	HANGES TO OFFICE		TORS IN 12
TITLE PD DELETE 1.1 TITLE	***************************************	Chan	
NAME COX, CHRISTOPHER 1.2 NAME			J
STREET ADDRESS 2039 E CROOKED LAKE DR 1.3 STREET ADDRESS			
CHY-ST-ZIP EUSTIS FL 1.4 CHY-ST-ZIP			
THE DELETE 2.1 TITLE		Chan	ige Addition
NAME 2.2 NAME			
STHEEL ADDRESS 2.3 STREET ADDRESS			
City-S1-ZIP 2.4 City-S1-ZIP			
TOLE DELETE 3.1 TOLE		Chan	nge 🔲 Addition
NAME 3.2 NAME			
STREET ADDRESS 3.3 STREET ADDRESS			
CHY-SE-ZIP 34.CHY-ST-ZIP			
THE DELETE 41 TITLE		☐ Chan	ige 🔲 Additio
NAME 4.2 NAME			
STREET ADDRESS 43 STREET ADDRESS			
CITY - ST - ZIP 4.4 CITY - ST - ZIP			
TOTALE DELETE 5.1 TITLE	Change Addition		
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STREET ADDRESS 5.3 STREET ADDRESS			
C(1Y-51-Z)P 54 C(1Y-51-Z)P			
TITLE DELETE 6.1 TITLE		☐ Chan	nge 🔲 Additio
NAME 6.2 NAME			
STREET ADDRESS 6.3 STREET ADDRESS			
CHY-ST-ZIP 6.4 CHY-ST-ZIP			

I do 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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

HIGHATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/21197

352-357-4100