

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 477610

FILED
Apr 18, 2011
Secretary of State

Entity Name: COX CORPORATION

Current Principal Place of Business:

274 NEEDLES TRAIL
LONGWOOD, FL 32779

New Principal Place of Business:

Current Mailing Address:

274 NEEDLES TRAIL
LONGWOOD, FL 32779

New Mailing Address:

FEI Number: 59-1611451

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COX, WILLIAM M JR
274 NEEDLES TRAIL
LONGWOOD, FL 32779 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

OFFICERS AND DIRECTORS:

Title: P
Name: COX, WILLIAM M JR
Address: 274 NEEDLES TRAIL
City-St-Zip: LONGWOOD, FL 32779

Title: V
Name: KLOHE, WILLIAM
Address: 724 MONTCLAIR TERRACE
City-St-Zip: ORANGE CITY, FL 32763

Title: V
Name: SWENSON, ANDREW
Address: 407 FOX VALLEY DRIVE
City-St-Zip: LONGWOOD, FL 32779

Title: S
Name: COX, SUSAN
Address: 274 NEEDLES TRAIL
City-St-Zip: LONGWOOD, FL 32779

I hereby 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 all other like empowered.

SIGNATURE: WILLIAM M COX JR

P

04/18/2011

Electronic Signature of Signing Officer or Director

Date