

# **2012 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# 530079

**FILED**  
**Apr 15, 2012**  
**Secretary of State**

**Entity Name:** COGBURN LAND & DEVELOPMENT, INC.

**Current Principal Place of Business:**

1030 W. BEACH DR.  
PANAMA CITY, FL 32401

**New Principal Place of Business:**

**Current Mailing Address:**

1030 W. BEACH DR.  
PANAMA CITY, FL 32401

**New Mailing Address:**

**FEI Number:** 59-1734074

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

COGBURN, ROBERT A.  
1030 W. BEACH DR.  
PANAMA CITY, FL 32401 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: PD  
Name: COGBURN, ROBERT A.  
Address: 1030 W. BEACH DR.  
City-St-Zip: PANAMA CITY, FL 32401

Title: DS  
Name: COGBURN, LOUISE  
Address: 1030 W. BEACH DR.  
City-St-Zip: PANAMA CITY, FL 32401

Title: VP  
Name: EDINGER, CHRISTINE C.  
Address: 704 SOUTH WILLOW AVENUE  
City-St-Zip: TAMPA, FL 33606

Title: DT  
Name: DR. JULIA A. COGBURN  
Address: 2903 WEST COACHMAN AVE  
City-St-Zip: TAMPA, FL 33611

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: LOUISE P. COGBURN

DS

04/15/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date