

2009 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A97000001392

FILED
Apr 13, 2009
Secretary of State

Entity Name: COX ENTERPRISES PARTNERSHIP, LTD.

Current Principal Place of Business:

46 OLD OAK DRIVE SOUTH
PALM COAST, FL 321374324 US

New Principal Place of Business:

Current Mailing Address:

46 OLD OAK DRIVE SOUTH
PALM COAST, FL 321374324

New Mailing Address:

46 OLD OAK DRIVE SOUTH
PALM COAST, FL 321374324 US

FEI Number: 65-0685553

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JENSEN, ROBERT W ESQ
2199 PONCE DE LEON BLVD
MERRICK PLAZA, SUITE 301
CORAL GABLES, FL 33134 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

GENERAL PARTNER INFORMATION:

Document #: G04078900028
Name: THOMAS COX IRREVOCABLE TRUST
Address: 46 OLD OAK DRIVE SOUTH
City-St-Zip: PALM COAST, FL 321374324
Document #: G04078900030
Name: JOHN COX IRREVOCABLE TRUST
Address: 2648 NE 34 STREET
City-St-Zip: FORT LAUDERDALE, FL 33306

ADDRESS CHANGES ONLY:

Address:
City-St-Zip:

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: THOMAS L. COX

PART

04/13/2009

Electronic Signature of Signing General Partner

Date