

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F01000000928

Entity Name: COXPARTNERS, INC.

**FILED**  
**Jan 14, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

5815 WINDSOR CT  
BOCA RATON, FL 33496

**New Principal Place of Business:**

**Current Mailing Address:**

5815 WINDSOR CT  
BOCA RATON, FL 33496

**New Mailing Address:**

FEI Number: 54-1838573

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

COX, HENRICUS AJM  
5815 WINDSOR CT  
BOCA RATON, FL 33496 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, HENRICUS AJM  
Address: 5815 WINDSOR CT  
City-St-Zip: BOCA RATON, FL 33496

Title: V  
Name: CASTELLON, M ARELY  
Address: 7805 NW BEACON SQUARE BLVD. SUITE 205  
City-St-Zip: BOCA RATON, FL 33487

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: HENRICUS COX

P

01/14/2011

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

\_\_\_\_\_  
Date