

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000003372

FILED
Apr 28, 2009
Secretary of State

Entity Name: COTTON & ASSOCIATES AUCTIONS & APPRAISALS, INC.

Current Principal Place of Business:

529 TURNBERRY RD
CANTONMENT, FL 32533

New Principal Place of Business:

Current Mailing Address:

PO BOX 12007
PENSACOLA, FL 32591

New Mailing Address:

FEI Number: 54-1712265

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COTTON, DON
529 TURNBERRY RD
CANTONMENT, FL 32533 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: COTTON, DON
Address: 529 TURNBERRY RD
City-St-Zip: CANTONMENT, FL 32533

Title: DST () Delete
Name: COTTON, MARY
Address: 529 TURNBERRY RD
City-St-Zip: CANTONMENT, FL 32533

Title: D () Delete
Name: COTTON DOCKENDORF, ZARAH
Address: 6312 PLANTATION FOREST DR
City-St-Zip: SPOTSYLVANIA, VA 22533

Title: D () Delete
Name: COTTON, MIKE
Address: 10248 CO. RD. 4 EAST
City-St-Zip: BLACK, AL 36314

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
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 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 an address, with all other like empowered.

SIGNATURE: DON COTTON

DP

04/28/2009

Electronic Signature of Signing Officer or Director

Date