

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F19084

FILED  
Mar 21, 2008  
Secretary of State

Entity Name: COX'S WHOLESALE SEAFOOD, INC.

## Current Principal Place of Business:

5806 N. OCCIDENT ST.  
P O BOX 15861  
TAMPA, FL 33684

## New Principal Place of Business:

5806 N. OCCIDENT ST.  
TAMPA, FL 33684

## Current Mailing Address:

5806 N. OCCIDENT ST.  
P O BOX 15861  
TAMPA, FL 33684

## New Mailing Address:

5806 N. OCCIDENT ST.  
TAMPA, FL 33684

FEI Number: 59-2057062

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SMITH, EDWARD B  
1600 KATHLEEN ROAD  
LAKELAND, FL 33805 US

## Name and Address of New Registered Agent:

PHILLIPS, LORI A  
1600 KATHLEEN ROAD  
LAKELAND, FL 33805 US

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: LORI PHILLIPS

03/21/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: COX, STEVE J,  
Address: 5806 N OCCIDENT ST  
City-St-Zip: TAMPA, FL 33614

Title: V ( ) Delete  
Name: PEARCE, DANE  
Address: 1600 KATHLEEN ROAD  
City-St-Zip: LAKELAND, FL 33805

Title: CD ( ) Delete  
Name: WATKINS, GEORGE  
Address: 1600 KATHLEEN RD.  
City-St-Zip: LAKELAND, FL 33805

Title: VT (X) Delete  
Name: SMITH, EDWARD B  
Address: 1600 KATHLEEN RD.  
City-St-Zip: LAKELAND, FL 33805

Title: D ( ) Delete  
Name: WATKINS, JOHN  
Address: 1958 MONROE DRIVE NE  
City-St-Zip: ATLANTA, GA 30324

## 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:

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: LORI PHILLIPS

CONT

03/21/2008

Electronic Signature of Signing Officer or Director

Date