

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F19084

FILED
Mar 09, 2009
Secretary of State

Entity Name: COX'S WHOLESALE SEAFOOD, INC.

Current Principal Place of Business:

5806 N. OCCIDENT ST.
TAMPA, FL 33684

New Principal Place of Business:

Current Mailing Address:

5806 N. OCCIDENT ST.
TAMPA, FL 33684

New Mailing Address:

FEI Number: 59-2057062

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PHILLIPS, LORI A
1600 KATHLEEN ROAD
LAKELAND, FL 33805 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: 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: 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: V (X) Change () Addition
Name: PEARCE, DAVE
Address: 1600 KATHLEEN ROAD
City-St-Zip: LAKELAND, FL 33805

Title: CD (X) Change () Addition
Name: WATKINS, MIKE
Address: 1600 KATHLEEN RD.
City-St-Zip: LAKELAND, FL 33805

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: STEVE COX

PRES

03/09/2009

Electronic Signature of Signing Officer or Director

Date