

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F44905

**FILED**  
**Jan 09, 2011**  
**Secretary of State**

**Entity Name:** COCHRAN BUILDING SUPPLY, INC.

**Current Principal Place of Business:**

2940 DOGWOOD RD  
VENICE, FL 34293 US

**New Principal Place of Business:**

**Current Mailing Address:**

2940 DOGWOOD RD  
VENICE, FL 34293 US

**New Mailing Address:**

**FEI Number:** 59-2149075

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

OWENS, WILLIAM E., JR.  
2940 DOGWOOD RD  
VENICE, FL 34293 US

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

OWENS, WILLIAM E JR.  
2940 DOGWOOD RD  
VENICE, FL 34293 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: WILLIAM E. OWENS, JR.

01/09/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PS  
Name: OWENS, WILLIAM E JR  
Address: 2940 DOGWOOD RD  
City-St-Zip: VENICE, FL 34293

Title: T  
Name: SMITH, CAROLYN O  
Address: 13634 DEXTER ST  
City-St-Zip: THORNTON, CO 80602

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: WILLIAM E. OWENS, JR

PRES

01/09/2011

Electronic Signature of Signing Officer or Director

Date