

2000 UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

00 MAY 15 AM 9:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **M98000001004**

1. Entity Name

COX COMMUNICATIONS PENSACOLA, L.L.C.

Principal Place of Business

1400 LAKE HEARN DRIVE, N.E.
ATLANTA GA 30319

Mailing Address

1400 LAKE HEARN DRIVE, N.E.
ATLANTA GA 30319-1464

2. Principal Place of Business

SAME AS ABOVE

3. Mailing Address

SAME AS ABOVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

58-2412417

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS/MEMBERS

TITLE **MGRM** ☐ Delete
NAME **COXCOM, INC.**
STREET ADDRESS **1400 LAKE HEARN DRIVE, N.E.**
CITY- ST- ZIP **ATLANTA GA 30319**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

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CITY- ST- ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

10. ADDITIONS/CHANGES

TITLE ☐ Change ☒ Addition
NAME **P JAMES ROBBINS**
STREET ADDRESS **1400 LAKE HEARN DR.**
CITY- ST- ZIP **ATLANTA, GA 30319**

TITLE ☐ Change ☒ Addition
NAME **VP PRESTON BARNETT**
STREET ADDRESS **1400 LAKE HEARN DR.**
CITY- ST- ZIP **ATLANTA, GA 30319**

TITLE ☐ Change ☒ Addition
NAME **S. ANDREW MERDEK**
STREET ADDRESS **1400 LAKE HEARN DR.**
CITY- ST- ZIP **ATLANTA, GA 30319**

TITLE ☐ Change ☒ Addition
NAME **T. D. DALLAS CLEMENT**
STREET ADDRESS **1400 LAKE HEARN DR.**
CITY- ST- ZIP **ATLANTA, GA 30319**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Date

Daytime Phone #

2/2/2000 404-843-5000

CR: 08/11/19