FILED
May 05, 2003 8:00 am
Secretary of State
05-05-2003 91765 003 ***150.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000048440

90128498

1. Entity Name
COKNEY, INC.

Principal Place of Business	Mailing Address
840 CAPE CORAL PKWY W, UNIT 1 CAPE CORAL, FL 33914	840 CAPE CORAL PKWY W, UNIT 1 CAPE CORAL, FL 33914

2. Principal Place of Business	3. Mailing Address
2814 SE 8th Ave	2814 SE 8th Ave
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: CAPE CORAL FL	City & State: CAPE CORAL FL
Zip: 33904 Country: USA	Zip: 33904 Country: USA

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number: 65-1122603 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
PHILLIPS, KRISTIN D 840 CAPE CORAL PKWY W, UNIT 1 CAPE CORAL, FL 33914	Name: PAUL L. LARROW Street Address (P.O. Box Number is Not Acceptable): 3501-312 Del Prado Blvd City: CAPE CORAL FL Zip Code: 33904

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: PAUL L. LARROW 3/17/03
Signature (and/or printed name of current registered agent, if applicable) (NOTE: Registered Agent's signature required when reinstating) DATE

FILE NOW!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V PHILLIPS, IVAN 840 CAPE CORAL PKWY W, UNIT 1 CAPE CORAL, FL 33914	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	DPST Kristen HASTINGS 2814 SE 8th AVENUE CAPE CORAL FL 33904	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	OR DAVID Russell 2814 SE 8th Avenue CAPE CORAL FL 33904	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

CR2E034 (10/02)

12. 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 or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: DPST 4-30-03 239-772-0804
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #