

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000118868

**FILED**  
**Mar 04, 2011**  
**Secretary of State**

**Entity Name:** COX CUSTOM HARDWOOD FLOORS INC.

**Current Principal Place of Business:**

15400 SHARK RD. W  
JACKSONVILLE, FL 32226 US

**New Principal Place of Business:**

**Current Mailing Address:**

15400 SHARK RD. W  
JACKSONVILLE, FL 32226 US

**New Mailing Address:**

**FEI Number:** 06-1712782

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COX, JERRY D II  
15400 SHARK ROAD WEST  
JACKSONVILLE, FL 32226 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

**OFFICERS AND DIRECTORS:**

**Title:** DPT  
**Name:** COX, JERRY D II  
**Address:** 15400 SHARK ROAD WEST  
**City-St-Zip:** JACKSONVILLE, FL 32226 US

**Title:** VPS  
**Name:** COX, LAUREL M  
**Address:** 15400 SHARK ROAD WEST  
**City-St-Zip:** JACKSONVILLE, FL 32226 US

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:** JERRY D COX

DPT

03/04/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date