2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000101464

Entity Name: COX & ASSOCIATES ATTORNEYS AT LAW, P.A.

US

FILED Mar 07, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1247 1ST AVE N 3111 W. DR. M.L.K. JR. BLVD. ST. PETERSBURG, FL 33705 US

SUITE 100

TAMPA, FL 33607

Current Mailing Address: New Mailing Address:

1247 1ST AVE N 1936 BRUCE B. DOWNS BLVD. ST. PETERSBURG, FL 33705

#508

WESLEY CHAPEL, FL 33544 US

FEI Number: 20-1326630 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

COX, GEOFFREY R COX, GEOFFREY R

1247 1ST AVE N 3111 W. DR. M.L.K. JR. BLVD.

ST. PETERSBURG, FL 33705 US SUITE 100

TAMPA, FL 33607 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: 03/07/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

COX, GEOFFREY R Name: Name: COX, GEOFFREY R

1247 1ST AVE N 1936 BRUCE B. DOWNS BLVD.,#508 Address: Address: ST PETERSBURG, FL 33705 City-St-Zip: City-St-Zip: WESLEY CHAPEL, FL 33544 US

Title: Title: (X) Change () Addition () Delete

COX, LORIEANN M Name: Name: COX. LORIEANN M

1247 1ST AVE N Address: 1936 BRUCE B. DOWNS BLVD.,#508 Address: ST PETERSBURG, FL 33705 WESLEY CHAPEL, FL 33544 US City-St-Zip: 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: GEOFFREY R. COX DIR 03/07/2009