## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

**FILED** 

May 13 1997 8:00am

Secretary of State

1997

DOCUMENT # P9300036008 (9)

COX VENTURES IV. INC.

STREET ADDRESS

Principal Plac	e of Business	Mailing Address			
16 VIA DELUNA PENSACOLA BEACH FL 32561 16 VIA DELUNA PENSACOLA BEACH FL 32561-200					
				3. Date Incorporated or Qualified 05/18/1993	3a. Date of Last Report 05/01/1996
2. Principal P	Place of Business	28. Mailing Address		4. FET Number	Applied For
21 16-A	A Via DeLuna	26 3107 Woodsw	ay	59-3183203	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		[27]			Fee Required
City & Stato 23 Pensacola Beach, FL		City & State  Gulf Breeze	. FL	Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Z <sub>10</sub>	Country	Zip [	Country	8. This corporation has liability for i	
24 3256	<del> </del>		30 US		X Yes No
	9, Name and Address of Currer		<u>~</u> ] <b>.</b>	10. Name and Address of New Re	
COX	(, CHAN		81 Name		
2 1/2 VIA DEL LUNA 82 Street Addre				ddress (P.O. Box Number is Not Acceptab	ole)
PENSACOLA FL 32561			20	7 Pinetree	
			83		
			84 City		<b>85</b> Zip Code
			Gu	lf Breeze	FL 85 Zin Code 32561
office or r	to the provisions of Sections 607.050 registered agent, or both, in the State	J2 and 607.1508, Florida Statutes e of Florida. Such change was au	s, the above-named c thori≱ed by the corp	corporation submits this statement for the poration's board of directors. I hereby accept	ot the appointment as registered
agent. I a	m familiar with, and accept the oblig	ations of, Section 607.0505, Flori	ida Statutes.		
SIGNATURE.	Signature, typed or printed name of registered age	ient and title if applicable. (NOTE	Registered Agent signature r	requited when reinslating)	DATE
12.		ID DIRECTORS	18.	ADDITIONS/CHANGES TO OFFIC	
TITLE	D	☐ DECETE	1.5 THLE		X Change Addition
NAME	MONTGOMERY, ROBERT B		1.2 NAME		
STREET ADDRESS	1388 COUNTRY CLUB BLVD		1.3 STREET ADORESS	3701 Cylon Drive	•
CITY-ST-ZIP	GULF BREEZE FL 32561		1.4 CITY - ST - ZIP	Gulf Breeze, FL 32561	
TITLE	D	DELETE	2.1 TOLE		X Change Addition
NAME	COX, CHAN		2.2 NAME		
STREET ADDRESS	207 PINRTREE		2.3 STREET ADDRESS	207 Pinetree	
CITY-ST-ZIP	GULF BREEZE FL 32561		2.4 C(1Y - \$1 - Z(P	Gulf Breeze, FL 3256	<u> </u>
TITLE	D Clark, Dave	☐ DELETE	3.1 7111.5		X Change Addition
name Street address	SENIC HWY.		3.2 NAME	107 0	
l	PENSACOLA FL 32561		3.3 STREET ADDRESS	127 S. Alcaniz	
CITY-ST-ZIP TITLE	I MIONOULA FE DEOUT	DECETÉ .	3.4 CITY-ST-7IP 4.1 TITLE	Pensacola, FL 32501	Change Addition
NAME		<u> </u>	4.2 NAME		
STREET ADDRESS			4.3 STREET ADORESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 THE	AND THE PROPERTY OF STATE OF THE PROPERTY OF T	Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADORESS		
CITY-ST-ZIP			5.4 C(1Y - S1 - Z(P		
TITLE		DELETE	G.I TITLE		Change Addition

14. Ido 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legat effect as if made under eath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 107, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.