

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris,
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 26, 1999 8:00 am
Secretary of State

04-26-1999 90124 031 ***150.00

DOCUMENT # *P96000009907^{9C}*

1. Corporation Name
C.O.C., Inc.

Principal Place of Business

Orlando, FL

Mailing Address

*C.O.C. Inc
4333 Daubert St
Orlando FL 32803*

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

January 24th 1996

4. FEI Number

59-3354481

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

Orlando FL

Suite, Apt. #, etc.

22 City & State

23 Zip Country

32803 USA

2a. Mailing Address

C.O.C. Inc

Suite, Apt. #, etc.

4333 Daubert St

27 City & State

Orlando FL

28 Zip Country

32803 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name

*W. Graham White, Esq.
c/o WHW PA. 250 Park Ave. S, 5th Floor*

83

84 City

Winter Park

FL

85 Zip Code

32789

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

W. Graham White, Esq.

W. Graham White

3/17/99

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME *President Scott Vossheis*
STREET ADDRESS *P.O. Box 140111*
CITY-STATE-ZIP *Orlando FL 32814*

TITLE ☐ DELETE
NAME *Vice-President - Secretary Paul Bremer*
STREET ADDRESS *4333 Daubert St*
CITY-STATE-ZIP *Orlando FL 32803*

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE
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STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition
12 NAME
13 STREET ADDRESS
14 CITY-STATE-ZIP

21 TITLE ☐ Change ☐ Addition
22 NAME
23 STREET ADDRESS
24 CITY-STATE-ZIP

31 TITLE ☐ Change ☐ Addition
32 NAME
33 STREET ADDRESS
34 CITY-STATE-ZIP

41 TITLE ☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY-STATE-ZIP

51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY-STATE-ZIP

61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 CITY-STATE-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone #

4-10-99

407-948-0948

CR2E034 (11/98)