

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000070778

**FILED**  
**Feb 21, 2012**  
**Secretary of State**

**Entity Name:** LENOX CAPITAL CORPORATION

**Current Principal Place of Business:**

1301 RIVERPLACE BLVD.  
SUITE 1840  
JACKSONVILLE, FL 32207

**New Principal Place of Business:**

1406 HENDRICKS AVENUE  
JACKSONVILLE, FL 32207

**Current Mailing Address:**

1301 RIVERPLACE BLVD, SUITE 1840  
JACKSONVILLE, FL 32207

**New Mailing Address:**

1406 HENDRICKS AVENUE  
JACKSONVILLE, FL 32207

**FEI Number:** 59-3527331

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TYRE, WARREN A  
1301 RIVERPLACE BLVD, SUITE 1840  
JACKSONVILLE, FL 32207 US

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

TYRE, WARREN A  
1406 HENDRICKS AVENUE  
JACKSONVILLE, FL 32207 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: WARREN A TYRE

02/21/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: TYRE, WARREN A  
Address: 1406 HENDRICKS AVENUE  
City-St-Zip: JACKSONVILLE, FL 32207

Title: D  
Name: COLLINS, JEFFREY H  
Address: 1406 HENDRICKS AVENUE  
City-St-Zip: JACKSONVILLE, FL 32207

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: WARREN A TYRE

PRES

02/21/2012

Electronic Signature of Signing Officer or Director

Date