## 2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 449524** 

Entity Name: COX & ASSOCIATES INSURANCE, INC.

**Current Principal Place of Business:** 

108 EDGELAKE DR DEBARY, FL 32713

**Current Mailing Address:** 

P.O. DRAWER 370

WINTER PARK, FL 32790

FEI Number: 59-1519691 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

JOHN , COX M. III 108 EDGELAKE DR. DEBARY, FL 32713 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: JOHN M COX III 04/12/2017

Electronic Signature of Registered Agent

Date

FILED Apr 12, 2017

**Secretary of State** 

CC0294511523

Officer/Director Detail:

Title PD Title VP

 Name
 COX , JOHN M. III
 Name
 COX, JOHN M. IV

 Address
 PO. DRAWER 370
 Address
 P.O DRAWER 370

City-State-Zip: WINTER PARK FL 32790 City-State-Zip: WINTER PARK FL 32790

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: JOHN M COX III

Electronic Signature of Signing Officer/Director Detail

PRESIDENT

04/12/2017 Date