

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000000851

FILED  
May 02, 2011  
Secretary of State

**Entity Name:** RESTAURANT COVERAGE ASSOCIATES, INC.

**Current Principal Place of Business:**

1333 BROAD STREET  
CLIFTON, NJ 07013

**New Principal Place of Business:**

**Current Mailing Address:**

1333 BROAD STREET  
CLIFTON, NJ 07013

**New Mailing Address:**

**FEI Number:** 22-3392031

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COOK, SCOTT  
C/O RCA  
2056 VISTA PARKWAY STE 280  
W PALM BEACH, FL 33411 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: HENRY, JAMES  
Address: 148 FERN AVENUE  
City-St-Zip: LYNDHURST, NJ 07071

Title: S  
Name: SKOWRONSKI, JOSEPH  
Address: 5 PARKVIEW LANE  
City-St-Zip: FAIRFIELD, NJ 07004

Title: V  
Name: HARTMANN, THOMAS  
Address: 2 ABINGDON STREET  
City-St-Zip: MORRIS PLAINS, NJ 07950

Title: V  
Name: MAHER, MICHAEL  
Address: 11 SOUTHFIELD ROAD  
City-St-Zip: BOONTON TOWNSHIP, NJ 07005

Title: T  
Name: LEONARD, MICHAEL  
Address: 133 OLDFIELD AVE  
City-St-Zip: HASBROUCK HEIGHTS, NJ 07604

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: MICHAEL LEONARD

T

05/02/2011

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date