

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 24, 2007 8:00 am
Secretary of State

04-24-2007 90009 031 ****61.25

DOCUMENT # 810735

1. Entity Name

LA COQUINA INC



Principal Place of Business

1956 S OCEAN LANE
FORT LAUDERDALE FL 33316

Mailing Address

1956 S OCEAN LANE
FORT LAUDERDALE FL 33316



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/06)

4. FEI Number

59-0782642

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~MOORMAN, ROBERT D~~
1956 S OCEAN LANE
FORT LAUDERDALE FL 33316

Name **KATHRINE CROTHALL**

Street Address (P.O. Box Number is Not Acceptable)

1956 S. OCEAN LN

City

Ft. Lauderdale

FL

Zip Code

33316

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Kathrine CROTHALL
Kathrine CROTHALL

4/12/07

Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

T ☐ Delete
NAME MOORMAN, ROBERT B
STREET ADDRESS 1956 S. OCEAN LANE
CITY-ST-ZIP FORT LAUDERDALE FL 33316

T ☒ Delete
NAME GIBBS, LOUIS
STREET ADDRESS 1956 SOUTH OCEAN LANE
CITY-ST-ZIP FORT LAUDERDALE FL 33316

S ☐ Delete
NAME GABLE, JOHN
STREET ADDRESS 1956 S OCEAN LANE
CITY-ST-ZIP FORT LAUDERDALE FL 33316

P ☐ Delete
NAME JOHNSON, WILLIAM
STREET ADDRESS 1956 S. OCEAN LANE
CITY-ST-ZIP FORT LAUDERDALE FL 33316

D ☐ Delete
NAME HOLMES, HANK
STREET ADDRESS 1956 S. OCEAN LANE
CITY-ST-ZIP FORT LAUDERDALE FL 33316

☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

D ☐ Change ☒ Addition
NAME KATHRINE CROTHALL
STREET ADDRESS 1956 S. OCEAN LANE
CITY-ST-ZIP Ft. Lauderdale FL 33316

☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Kathrine CROTHALL
Kathrine CROTHALL

4/12/07

954-524-3930

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #