2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000003541

Entity Name: GLORIA JEAN'S GOURMET COFFEES CORP.

FILED Jul 15, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
28 EXECUTIVE PARK #200	28 EXECUTIVE PARK #200

ATTN: NORMA ATTENTION: KAREN CROUCH IRVINE, CA 92614 IRVINE, CA 92614

Current Mailing Address: New Mailing Address:

28 EXECUTIVE PARK #200
ATTN: NORMA
ATTN: KAREN CROUCH
IRVINE, CA 92614

28 EXECUTIVE PARK #200
ATTN: KAREN CROUCH
IRVINE, CA 92614

FEI Number: 36-3185413 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP () Delete Title: PRES (X) Change () Addition

 Name:
 PHILLIPS, JAMES R
 Name:
 SALEH, NABI

 Address:
 28 EXECUTIVE PARK SUITE 200
 Address:
 11 HOYLE AVENUE

City-St-Zip: IRVINE, CA 92614 City-St-Zip: CASTLE HILL, NSW 2154, AU AUSTRALIA

Title: DT () Delete Title: CEO (X) Change () Addition

Name: MCCARTHY, SEAN Name: MOUNT, CARL

Address: 28 EXE. PRK STE 200 Address: 28 EXECUTIVE PARK, SUITE 200

City-St-Zip: IRVINE, CA 92614 City-St-Zip: IRVINE, CA 92614

Title: () Delete Title: VP () Change (X) Addition

Name: Name: BARR, ANTHONY

Address: 28 EXECUTIVE PARK, SUITE 200

City-St-Zip: City-St-Zip: IRVINE, CA 92614

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ANTHONY BARR VP 07/15/2009