

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000004595

FILED  
Apr 12, 2011  
Secretary of State

Entity Name: ROGER GOURMET COFFEE CORP.

**Current Principal Place of Business:**

1731 AVIATION BLVD.  
LINCOLN, CA 95648

**New Principal Place of Business:**

**Current Mailing Address:**

1731 AVIATION BLVD.  
LINCOLN, CA 95648

**New Mailing Address:**

FEI Number: 94-2564405

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WILKENS, JO  
5820 LIVERPOOL DRIVE  
TAMPA, FL 33615 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: PCEO  
Name: ROGERS, JON  
Address: 1731 AVIATION BLVD.  
City-St-Zip: LINCOLN, CA 95648

Title: D  
Name: ROGERS, JON  
Address: 1731 AVIATION BLVD.  
City-St-Zip: LINCOLN, CA 95648

Title: S  
Name: ROGERS, BARBARA  
Address: 1731 AVIATION BLVD.  
City-St-Zip: LINCOLN, CA 95648

Title: DCOO  
Name: ROGERS, PETE  
Address: 1731 AVIATION BLVD.  
City-St-Zip: LINCOLN, CA 95648

Title: CFO  
Name: SARINA, MIKE  
Address: 1731 AVIATION BLVD.  
City-St-Zip: LINCOLN, CA 95648

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: MIKE SARINA

CFO

04/12/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date