

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000000454

FILED  
Mar 09, 2010  
Secretary of State

**Entity Name:** TREASURE COAST BREWMASTERS, INC.

**Current Principal Place of Business:**

1802 SE MANTUA STREET  
PORT SAINT LUCIE, FL 34952

**New Principal Place of Business:**

**Current Mailing Address:**

1802 SE MANTUA STREET  
PORT SAINT LUCIE, FL 34952

**New Mailing Address:**

**FEI Number:** 26-4403808

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

VITRELLA, SAL  
1802 SE MANTUA STREET  
PORT SAINT LUCIE, FL 34952 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: D  
Name: VITRELLA, SAL  
Address: 1802 SE MANTUA STREET  
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: D  
Name: GILBERT, EDWARD  
Address: 2291 SE BLOSSOM ROAD  
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: D  
Name: RESTIFO, JAMES  
Address: 3140 SW ALEXANDER CT  
City-St-Zip: PALM CITY, FL 34990

Title: D  
Name: RAYSOR, JAMES  
Address: 490 NW EMILIA WAY  
City-St-Zip: JENSEN BEACH, FL 34957

Title: D  
Name: CARBONE, MARK  
Address: 564 CANOE PARK CIRCLE  
City-St-Zip: PORT SAINT LUCIE, FL 34983

Title: D  
Name: POLZIN, RONALD  
Address: 8049 SE EAGLE AVENUE  
City-St-Zip: HOBE SOUND, FL 33455

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** JAMES RESTIFO

TRES

03/09/2010

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

\_\_\_\_\_  
Date