2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000115790

FILED Jun 26, 2009 Secretary of State

Entity Name: FLORIDA CENTRAL COAST SECURITY CORPORATION

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	REST AVE				
#101	= 20000				
COCOA, F					
Current N	lailing Address	5:	New Mailing Addres	ss:	
	REST AVE				
#101 COCOA, F	FL 32922				
FEI Number	: 10-0000129	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of Cu	ırrent Registered Agent:	Name and Address	of New Registered Agent:	
1485 N AT	RD, L. GEORGE FLANTIC AVE #7 SEACH, FL 3293	102			
	e named entity so e of Florida.	ubmits this statement for the p	urpose of changing its registere	ed office or registered agent, or both,	
SIGNATU	RE:				
	Electroni	Signature of Registered Age	ent	Date	
	ce with s. 607.193	(2)(b), F.S., the corporation did no	t receive the prior notice.		
Election Ca	mpaign Financing	Trust Fund Contribution ().			
	mpaign Financing S AND DIRECT	Trust Fund Contribution (). ORS:	ADDITIONS/CHANG	ES TO OFFICERS AND DIRECTORS	
	S AND DIRECT	ORS: Delete LES L DR	ADDITIONS/CHANG Title: Name: Address: City-St-Zip:	ES TO OFFICERS AND DIRECTORS () Change () Addition	
OFFICER Title: Name: Address:	PS () I THOMAS, CHAR 870 INDIANOLA MERRITT ISLAN	ORS: Delete LES L DR D, FL 32953 Delete DR	Title: Name: Address:		
OFFICER Title: Name: Address: City-St-Zip: Title: Name: Address:	PS () I THOMAS, CHAR 870 INDIANOLA MERRITT ISLAN S () I THOMAS, FAYE 870 INDIANOLA MERRITT ISLAN	ORS: Delete LES L DR D, FL 32953 Delete DR D, FL 32953 Delete	Title: Name: Address: City-St-Zip: Title: Name: Address:	() Change () Addition	

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: CHARLES L THOMAS PS 06/26/2009