

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000114888

**FILED**  
**Mar 23, 2012**  
**Secretary of State**

**Entity Name:** MAHONEY COFFEE SERVICE, INC.

**Current Principal Place of Business:**

1617 SOUTH TUTTLE AVENUE  
SUITE 2A  
SARASOTA, FL 34239 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O TED DUNN, CPA 1617 S. TUTTLE AVE.  
SUITE 2A  
SARASOTA, FL 34239

**New Mailing Address:**

**FEI Number:** 42-1557054      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

DUNN, TED  
1617 S. TUTTLE AVE.  
SUITE 2A  
SARASOTA, FL 34239 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:** P  
**Name:** MAHONEY, BRIAN D  
**Address:** 2005 HAWTHORNE ROAD  
**City-St-Zip:** VENICE, FL 34293

**Title:** VP  
**Name:** HOWELL, FRANK  
**Address:** 361 AVENIDA LEONA  
**City-St-Zip:** SARASOTA, FL 34242

**Title:** T  
**Name:** DUNN, TED  
**Address:** 1617 S. TUTTLE AVE. SUITE 2A  
**City-St-Zip:** SARASOTA, FL 34239

**Title:** S  
**Name:** GREGOREK, RANDAL  
**Address:** 3220 SALEM AVE  
**City-St-Zip:** SARASOTA, FL 34232

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: TED DUNN

T

03/23/2012

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

\_\_\_\_\_  
Date