

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000114974

Entity Name: COTE D'AZUR, INC.

FILED  
Jul 25, 2007  
Secretary of State

## Current Principal Place of Business:

5200 WEST C-30A  
SANTA ROSA BEACH, FL 32459

## New Principal Place of Business:

## Current Mailing Address:

5200 WEST C-30A  
SANTA ROSA BEACH, FL 32459

## New Mailing Address:

5200 WEST COUNTY C30-A  
SANTA ROSA BEACH, FL 32459

FEI Number: 56-2360477

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FOWLER, KELLE  
5200 WEST C-30A  
SANTA ROSA BEACH, FL 32459 US

## Name and Address of New Registered Agent:

FOWLER, KELLE  
5200 WEST COUNTY C30-A  
SANTA ROSA BEACH, FL 32459 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: KELLENE FOWLER

07/25/2007

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:

Title: P ( ) Delete  
Name: DRUELLE, JACQUES  
Address: RUE DU FOULIN  
City-St-Zip: BERTANGLES, FRANCE, 80260

Title: VPST ( ) Delete  
Name: FOWLER, KELLE  
Address: 5200 W SCENIC HWY 30-A  
City-St-Zip: SANTA ROSA BEACH, FL 32459

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JACQUES DRUELLE

P

07/25/2007

Electronic Signature of Signing Officer or Director

Date