## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000080490

Entity Name: MUNYAN COATINGS EAST, INC.

FILED Jun 09, 2009 Secretary of State

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Current Principal Place of Business:			New Princ	New Principal Place of Business:		
1175 GOULD STREET CLEARWATER, FL 33756 57				1175 GOULD STREET CLEARWATER, FL 33756		
Current Mailing Address:			New Maili	New Mailing Address:		
1175 GOULD STREET CLEARWATER, FL 33756						
FEI Number:	20-0112959	FEI Number Applied For ( ) FEI	Number Not Appl	licable ( ) Certificate of Status Desired ( )		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
BASKIN, HAMDEN H III 516 N. FT. HARRISON AVENUE CLEARWATER`, FL 33755 US						
The above in the State		submits this statement for the purpos	e of changing i	its registered office or registered agent, or both,		
SIGNATUR	RE:					
	Electror	ic 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:  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:						
Title: Name: Address: City-St-Zip:		Delete PH TREET	Title: Name: Address: City-St-Zip:	P (X) Change ( ) Addition MUNYAN, RALPH 1175 GOULD STREET CLEARWATER, FL 33756		
Title: Name: Address: City-St-Zip:	O ( ) RITZHEIMER, A 36438 ST. JOE DADE CITY, FL	ROAD	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	D ( ) STEVE, TRYON 3748 SHADY B LARGO, FL 33	LUFF DRIVE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	D ( ) REISMAN, JAN 7501 ULMERTO LARGO, FL 33	DN #1712	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	D ( ) MORESCHI, MI 9904 120TH CO SEMINOLE, FL	DURT NORTH	Title: Name: Address: City-St-Zip:	D (X) Change ( ) Addition MORESCHI, MEGAN 2944 WEST BAY DRIVE APT 306 BELLEAIR, FL 33770		
Title: Name: Address: City-St-Zip:	D ( ) JASON, FRENC 16141 GARDER TAMPA FL 33	NDALE DRIVE	Title: Name: Address: City-St-Zip:	( ) 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: MEGAN MORESCHI D 06/09/2009