2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000084068

CARLSON, GREGORY

FOREST HILLS, NY 11375

61-20 GRAND CENTRAL PARKWAY

Name:

Address:

City-St-Zip:

Entity Name: COFFEE-CARLSON REALTY INC

FILED Mar 04, 2006 Secretary of State

	mer correct connection that it, ince.			
Current Principal Place of Business:		New Principal Place of	New Principal Place of Business:	
	AND CENTRAL PARKWAY HILLS, NY 11375			
Current Mailing Address:		New Mailing Address	New Mailing Address:	
	AND CENTRAL PARKWAY HILLS, NY 11375			
FEI Number	: FEI Number Applied For ()	FEI Number Not Applicable (X)	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:		: Name and Address of	Name and Address of New Registered Agent:	
2731 EXEC SUITE 4	RVICES, INC. CUTIVE PARK DRIVE , FL 33331 US			
	e named entity submits this statement for t e of Florida.	he purpose of changing its registered	office or registered agent, or both,	
SIGNATUI	RE:			
	Electronic Signature of Registered	Agent	Date	
Election Car	mpaign Financing Trust Fund Contribution $(\).$			
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	CEO () Delete COFFEY-CARLSON, VALERIE 61-20 GRAND CENTRAL PARKWAY FOREST HILLS, NY 11375	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	CFOD () Delete COFFEY-CARLSON, VALERIE 61-20 GRAND CENTRAL PARKWAY FOREST HILLS, NY 11375	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	COO () Delete CARLSON, GREGORY 61-20 GRAND CENTRAL PARKWAY FOREST HILLS, NY 11375	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	VD () Delete	Title:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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.

Name:

Address:

City-St-Zip:

SIGNATURE: VALERIE CARLSON PRES 03/04/2006