

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000119246

Entity Name: BEST COUPON BOOK INC

FILED
Apr 21, 2009
Secretary of State

Current Principal Place of Business:

260 MAITLAND AVE - # 2000
ALTAMONTE SPRINGS, FL 32701

New Principal Place of Business:

260 MAITLAND AVE
SUITE 2000
ALTAMONTE SPRINGS, FL 32701

Current Mailing Address:

260 MAITLAND AVE - # 2000
ALTAMONTE SPRINGS, FL 32701

New Mailing Address:

260 MAITLAND AVE
SUITE 2000
ALTAMONTE SPRINGS, FL 32701

FEI Number: 41-2184746

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FORET, JOHN F
260 MAITLAND AVE - # 2000
ALTAMONTE SPRINGS, FL 32701 US

Name and Address of New Registered Agent:

FORET, JOHN F
260 MAITLAND AVE
SUITE 2000
ALTAMONTE SPRINGS, FL 32701 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: JOHN FORET

04/21/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FORET, JOHN F
Address: 260 MAITLAND AVE - # 2000
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: VP () Delete
Name: FORET, SUSAN
Address: 260 MAITLAND AVE - # 2000
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: S () Delete
Name: FORET, FELICIA
Address: 260 MAITLAND AVE - # 2000
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: T () Delete
Name: FORET, MANNY
Address: 260 MAITLAND AVE - # 2000
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: JOHN FORET

P

04/21/2009

Electronic Signature of Signing Officer or Director

Date