## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000144743

Entity Name: COCOA BEACH COFFEE COMPANY

FILED Jul 02, 2006 Secretary of State

**Current Principal Place of Business:** New Principal Place of Business: 1445 S. ATLANTIC AVE 2023 NORTH ATLANTIC AVE COCOA BEACH, FL 32931 211 COCOA BEACH, FL 32931 **Current Mailing Address: New Mailing Address:** 453 WEATHERSFIELD AVE 1445 S. ATLANTIC AVE COCOA BEACH, FL 32931 ALTAMONTE SPRINGS, FL 32714 FEI Number: 20-3687807 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MOORE, BRANDON 453 WEATHERSFIELD AVE. ALTAMONTE SPRINGS, FL 32714 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: 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change ( ) Addition MOORE, MICHELLE S. Name: Name: MOORE, MICHELLE S. 453 WEATHERSFIELD AVE. 453 WEATHERSFIELD AVE. Address: Address: City-St-Zip: ALTAMONTE SPRINGS, FL 32714 City-St-Zip: ALTAMONTE SPRINGS, FL 32714 DΡ Title: Title: () Delete () Change () Addition Name: POSADA, HERNANDO Name: 1445 S. ATLANTIC AVE Address: Address: COCOA BEACH, FL 32931 City-St-Zip: City-St-Zip: Title: Title: DS () Delete () Change () Addition PAULUS, JOSEPH Name: Name: 1445 S. ATLANTIC AVE Address: Address: City-St-Zip: COCOA BEACH, FL 32931 City-St-Zip: Title: () Delete Title: DV (X) Change ( ) Addition MOORE, BRANDON MOORE, BRANDON Name: Name: Address: 453 WEATHERSFIELD AVE. Address: 453 WEATHERSFIELD AVE. City-St-Zip: ALTAMONTE SPRINGS, FL 32714 City-St-Zip: ALTAMONTE SPRINGS, FL 32714

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.

SIGNATURE: BRANDON P. MOORE D/V 07/02/2006