

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000087864

Entity Name: THE COCOA PARLOUR INC

FILED
Aug 09, 2009
Secretary of State

Current Principal Place of Business:

936 TRINIDAD ROAD
COCOA BEACH, FL 32931 US

New Principal Place of Business:

505 COCOA ISLES BLVD
COCOA BEACH, FL 32931 US

Current Mailing Address:

936 TRINIDAD ROAD
COCOA BEACH, FL 32931 US

New Mailing Address:

505 COCOA ISLES BLVD
COCOA BEACH, FL 32931 US

FEI Number: 26-3549052

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HALL, JOSEPH R
936 TRINIDAD ROAD
COCOA BEACH, FL 32931 US

Name and Address of New Registered Agent:

OSKERSON, TRACY L
505 COCOA ISLES BLVD
COCOA BEACH, FL 32931 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: TRACY L OSKERSON

08/09/2009

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: PRES () Delete
Name: HALL, JOSEPH R
Address: 936 TRINIDAD ROAD
City-St-Zip: COCOA BEACH, FL 32931 US

Title: SEC () Delete
Name: OSKERSON, TRACY L
Address: 936 TRINIDAD ROAD
City-St-Zip: COCOA BEACH, FL 32931 US

Title: TREA () Delete
Name: HALL, JOSEPH R
Address: 936 TRINIDAD ROAD
City-St-Zip: COCOA BEACH, FL 32931 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: OSKERSON, TRACY L
Address: 505 COCOA ISLES BLVD
City-St-Zip: COCOA BEACH, FL 32931 US

Title: SEC (X) Change () Addition
Name: OSKERSON, TRACY L
Address: 505 COCOA ISLES BLVD
City-St-Zip: COCOA BEACH, FL 32931 US

Title: TREA (X) Change () Addition
Name: OSKERSON, TRACY L
Address: 505 COCOA ISLES BLVD
City-St-Zip: COCOA BEACH, FL 32931 US

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: TRACY L OSKERSON

PRES

08/09/2009

Electronic Signature of Signing Officer or Director

Date