

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 28, 2008 08:00 A
Secretary of State

DOCUMENT # P96000038574

1. Entity Name

HOT COCOA OF BREVARD, INC.



Principal Place of Business

1015 FLOTILLA CLUB DRIVE
INDIAN HARBOR BEACH FL 32937
US

Mailing Address

1015 FLOTILLA CLUB DRIVE
INDIAN HARBOR BEACH FL 32937
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E034 (10/07)

4. FEI Number
NO-T APPLICABLE

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MORIN, ILETA J
1015 FLOTILLA CLUB DRIVE
INDIAN HARBOR BEACH FL 32937

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title. (If applicable.)

(NOTE: Registered Agent signature required when reinstating.)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P	☐ Delete
NAME	JOSEPHS, JUDY	
STREET ADDRESS	370 LAKEVIEW LANE	
CITY-ST-ZIP	PALM BAY FL 32909	
TITLE	D	☐ Delete
NAME	TOOMEY, HAZEL	
STREET ADDRESS	1515 SYKES CREEK	
CITY-ST-ZIP	MERRITT ISLAND FL 32953	
TITLE	TD	☐ Delete
NAME	MORIN, JOYCE	
STREET ADDRESS	1015 FLOTILLA CLUB DR	
CITY-ST-ZIP	INDIAN HARBOR BEACH FL 32937	
TITLE	D	☐ Delete
NAME	HOROWITZ, JERRY	
STREET ADDRESS	240 MALAGA COURT	
CITY-ST-ZIP	MERRITT ISLAND FL 32953	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

UG00000798991
01/30/08-80050-024 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/24/2008

Page No. 1 of 1