

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 713002

FILED  
Feb 09, 2007  
Secretary of State

Entity Name: BOYS AND GIRLS CLUBS OF THE EMERALD COAST, INC.

**Current Principal Place of Business:**

923 DENTON BLVD  
FT WALTON BEACH, FL 325471652

**New Principal Place of Business:**

13 MEMORIAL PKWY, SUITE 201  
FT WALTON BEACH, FL 32548

**Current Mailing Address:**

923 DENTON BLVD  
FT WALTON BEACH, FL 325471652

**New Mailing Address:**

13 MEMORIAL PKWY, SUITE 201  
FT WALTON BEACH, FL 32548

FEI Number: 59-1267050

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HENLEY, CRAWFORD W  
923 DENTON BLVD.  
FORT WALTON BEACH, FL 32547 US

**Name and Address of New Registered Agent:**

HENLEY, CRAWFORD W  
13 MEMORIAL PKWY, SUITE 201  
FORT WALTON BEACH, FL 32548 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: \_\_\_\_\_

02/09/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: HENLEY, CRAWFORD  
Address: 923 DENTON BLVD  
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: VCD ( ) Delete  
Name: POATE, CHRIS  
Address: 36468 EMERALD COAST PKWY  
City-St-Zip: DESTIN, FL 32541

Title: 1VCD ( ) Delete  
Name: TORRES, EDDIE  
Address: 10221 EMERALD COAST PKWY STE 16  
City-St-Zip: MIRAMAR BEACH, FL 32550

Title: TD ( ) Delete  
Name: VINCENT, JOHN  
Address: POB 6876  
City-St-Zip: MIRAMAR BEACH, FL 32550

Title: SD ( ) Delete  
Name: KELLY, KEVIN  
Address: 238 OLD HWY 98  
City-St-Zip: DESTIN, FL 32541

Title: VD ( ) Delete  
Name: CRAUL, BRUCE  
Address: 4100 LEGENDARY DR STE 200  
City-St-Zip: DESTIN, FL 32541

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: HENLEY, CRAWFORD  
Address: 13 MEMORIAL PKWY, SUITE 201  
City-St-Zip: FORT WALTON BEACH, FL 32548

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:

Title: C (X) Change ( ) Addition  
Name: CRAUL, BRUCE  
Address: 4100 LEGENDARY DR STE 200  
City-St-Zip: DESTIN, FL 32541

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BRUCE CRAUL

CHAI

02/09/2007

Electronic Signature of Signing Officer or Director

Date