

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F96000005865 (8)

1. Corporation Name

EMERALD COAST MEDIA & MARKETING, INC.

Principal Place of Business

8955 U.S. 90 WEST, STE 105
DESTIN FL 32541

Mailing Address

8955 U.S. 90 WEST, STE 105
DESTIN FL 32541

FILED
97 FEB 24 PM 2:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



2. Principal Place of Business

21 3906 Highway 98 West

Suite, Apt. #, etc.

22 Unit 28

City & State

23 Santa Rosa, CA

Zip

Country

24 32459

25

2a. Mailing Address

26 P. O. Box 2363

Suite, Apt. #, etc.

27

City & State

28 Santa Rosa, CA

Zip

Country

29 32459

30

3. Date Incorporated or Qualified

11/12/1996

3a. Date of Last Report

4. FEI Number

33-0727199

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes

☐ No

9. Name and Address of Current Registered Agent

NRAI SERVICES, INC.
526 E. PARK AVENUE
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Ed Hand

(NOTE: Registered Agent signature required when reinstating)

DATE

2/24/97

12. OFFICERS AND DIRECTORS

TITLE CD ☐ DELETE
NAME ROSSE, JAMES N
STREET ADDRESS 17688 FITCH
CITY-ST-ZIP IRVINE CA 92614

TITLE P ☐ DELETE
NAME SEGAL, JONATHAN
STREET ADDRESS 17688 FITCH
CITY-ST-ZIP IRVINE CA 92614

TITLE S ☐ DELETE
NAME WALLACE, RICHARD A
STREET ADDRESS 17688 FITCH
CITY-ST-ZIP IRVINE CA 92614

TITLE V ☐ DELETE
NAME KUYKENDALL, DAVID L
STREET ADDRESS 17688 FITCH
CITY-ST-ZIP IRVINE CA 92614

TITLE D ☐ DELETE
NAME HARDIE, DOUGLAS R
STREET ADDRESS 1135 EAST VAN BUREN
CITY-ST-ZIP BROWNSVILLE TX 78521

TITLE D ☐ DELETE
NAME HOILES, TIMOTHY C
STREET ADDRESS 27 LAKE AVENUE
CITY-ST-ZIP COLORADO SPRINGS CO 80906

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE V ☐ Change ☒ Addition
12 NAME Mike Mullins
13 STREET ADDRESS 3906 Highway 98 West, Unit 28
14 CITY-ST-ZIP Santa Rosa, CA 32459

21 TITLE D ☐ Change ☒ Addition
22 NAME Hardie, Robert C.
23 STREET ADDRESS Bald Mountain Road
24 CITY-ST-ZIP Browns Valley, CA 95918

31 TITLE ☐ Change ☐ Addition
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

James N. Rosse

James N. Rosse, CEO

2/13/97

714/253-2306

(SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)

Date

Daytime Phone #

CR2E034 (9/96)