

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

FILED
May 13 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # **F96000005865**
1. Corporation Name
Emerald Coast Media & Marketing, Inc.

Principal Place of Business: **3906 Highway 98 West, Unit 28, Santa Rosa, FL 32459**
Mailing Address: **P. O. Box 2363, Santa Rosa, FL 32459**

DO NOT WRITE IN THIS SPACE
3. Date Incorporated or Qualified: **11/12/1996**

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-29) fields.

4. FEI Number: **33-0727199**
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 owes or has paid the current year Intangible Personal Property Tax due June 30: Yes No

9. Name and Address of Current Registered Agent
**NRAI Services, Inc.
526 East Park Avenue
Tallahassee, FL 32301**

10. Name and Address of New Registered Agent (81-85) fields.

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 _____ DATE _____
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	C/D	<input type="checkbox"/> DELETE
NAME	James N. Rosse	
STREET ADDRESS	17666 Fitch	
CITY-ST-ZIP	Irvine, CA 92614	
TITLE	P	<input type="checkbox"/> DELETE
NAME	Jonathan Segal	
STREET ADDRESS	17666 Fitch	
CITY-ST-ZIP	Irvine, CA 92614	
TITLE	V/T	<input type="checkbox"/> DELETE
NAME	David L. Kuykendall	
STREET ADDRESS	17666 Fitch	
CITY-ST-ZIP	Irvine, CA 92614	
TITLE	S	<input type="checkbox"/> DELETE
NAME	Richard A. Wallace	
STREET ADDRESS	17666 Fitch	
CITY-ST-ZIP	Irvine, CA 92614	
TITLE	D	<input type="checkbox"/> DELETE
NAME	Robert C. Hardie	
STREET ADDRESS	Bald Mountain Road	
CITY-ST-ZIP	Browns Valley, CA 95918	
TITLE	V	<input type="checkbox"/> DELETE
NAME	Mike Mullins	
STREET ADDRESS	3906 Highway 98 West, Unit 28	
CITY-ST-ZIP	Santa Rosa, FL 32459	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

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***150.00

14. I 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: *David L. Kuykendall* David L. Kuykendall 4-27-98 (949) 553-9292
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR SVP & CFO

CR2E034 (10/97)