2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006451

FILED Jul 24, 2008 Secretary of State

Entity Name: EMERALD COAST GOLDEN RETRIEVER RESCUE, INC.

Current Principal Place of Business: New Principal Place of Business: 548 MARY ESTHER CUTOFF 1711 MISSOURI AVENUE LYNN HAVEN, FL 32444 SUITE 130 FORT WALTON BEACH, FL 32548 **New Mailing Address: Current Mailing Address:** 2310 S HWY 77 548 MARY ESTHER CUTOFF SUITE 110, BOX 108 SUITE 130 FORT WALTON BEACH, FL 32548 LYNN HAVEN, FL 32444 FEI Number: 55-0795820 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HYDE, TRACEY J 1201 TAMMY LANE CALLAWAY, FL 32404 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition HYDE, WILLIAM Name: Name: 1201 TAMMY LANE Address: Address: City-St-Zip: CALLAWAY, FL 32404 City-St-Zip: Title: () Delete Title: (X) Change () Addition TEAR TT, BOB Name: TEER, ROBERT Name: Address: 1711 MISSOURI AVENUE Address: 1711 MISSOURI AVENUE City-St-Zip: LYNN HAVEN, FL 32444 City-St-Zip: LYNN HAVEN, FL 32444 Title: () Delete Title: () Change () Addition CHRISTY, SANDI Name: Name: Address: 122 MARINER LANE Address: City-St-Zip: PORT ST JOE, FL 32456 City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: HOGLEN, TAMMY Name: HALL, KAREN 2413 KODIAK COURT Address: Address: 4011 W 27TH COURT City-St-Zip: NAVARRE, FL 32566 City-St-Zip: PANAMA CITY, FL 32405 Title: () Delete Title: (X) Change () Addition YATES, ROCKY YATES, ROCKY Name: Name: PO BOX 171 PO BOX 171 Address: Address: City-St-Zip: DESTIN, FL 32540 City-St-Zip: DESTIN, FL 32540 Title: (X) Delete Title: () Change () Addition HALL KAREN Name: Name: Address: 4011 W 27TH COURT Address: PANAMA CITY, FL 32405 City-St-Zip: City-St-Zip:

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

SIGNATURE: ROBERT TEER TRES 07/24/2008