

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000000759

FILED
Feb 15, 2011
Secretary of State

Entity Name: EMERALD COAST REGION 1 WRECK ASSOCIATION, INCORPORATED

Current Principal Place of Business:

1948 JOSHUA DRIVE
CANTONMENT, FL 325334533

New Principal Place of Business:

Current Mailing Address:

1948 JOSHUA DRIVE
CANTONMENT, FL 325334533

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NAVARRO, GARY H
1948 JOSHUA DRIVE
CANTONMENT, FL 325334533 US

Name and Address of New Registered Agent:

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:

Title: DSRA
Name: NAVARRO, GARY H
Address: 1948 JOSHUA DRIVE
City-St-Zip: CANTONMENT, FL 325334533

Title: D
Name: KIRCHOFF, MIKE
Address: 203 E. 2ND. PLACE
City-St-Zip: PANAMA CITY, FL 32401

Title: D
Name: MEREDITH, BEN
Address: 136 MENZEL ST.
City-St-Zip: VALPARAISO, FL 32580

Title: D
Name: SCHEEL, CARLA
Address: 4336 SABLAN LANE
City-St-Zip: MILTON, FL 32583

Title: D
Name: SADONI, SAM
Address: 9 NW JONQUIL AVENUE
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: D
Name: CARNEY, ALLEN F
Address: 1933 JOSHUA DRIVE
City-St-Zip: CANTONMENT, FL 325334526

I hereby 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 all other like empowered.

SIGNATURE: GARY H. NAVARRO

D

02/15/2011

Electronic Signature of Signing Officer or Director

_____ Date