

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31195

FILED
Apr 22, 2012
Secretary of State

Entity Name: EMERALD COAST REGIONAL MUSTANG CLUB, INCORPORATED

Current Principal Place of Business:

GARY SMITH FORD ATTN: ECRMC
#1 BEAL PARKWAY
FORT WALTON BEACH, FL 32548 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 4431
FORT WALTON BEACH, FL 32549 US

New Mailing Address:

FEI Number: 62-1629070

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

O'NEIL, BRIAN
7394 MANATEE STREET
NAVARRE, FL 32566 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: P
Name: SYMONS, SHERRI
Address: 182 NUN DR.
City-St-Zip: CRESTVIEW, FL 32536

Title: V
Name: GRATER, RAY O'NEIL
Address: ROUTE 3 #2 ENDA LANE
City-St-Zip: MARY ESTHER, FL 32569

Title: T
Name: ONEIL, BRIAN
Address: 7394 MANATTEE ST
City-St-Zip: NAVARRE, FL 32566

Title: S
Name: CHRISTIANSON, JUDY
Address: 606 COUNTY HIGHWAY 1087
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

Title: BM
Name: MICHELSON, KEN
Address: 5 CAMILLA DR.
City-St-Zip: MARY ESTHER, FL 32569

Title: BM
Name: BENNETT, DAVID
Address: 1010 37TH STREET
City-St-Zip: NICEVILLE, FL 32578

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: BRIAN O'NEIL

TREA

04/22/2012

Electronic Signature of Signing Officer or Director

Date