


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 14, 2007 08:00 AM
Secretary of State

DOCUMENT # N38598 1. Entity Name EMERALD COAST CHURCH OF CHRIST, INC.	
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Principal Place of Business 300 SOUTH AVENUE FT. WALTON BEACH, FL 32547	Mailing Address % CECIL R. BELK 300 SOUTH AVENUE FT. WALTON BEACH, FL 32547
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01082007 No Chg-NP CR2E037 (4/06)	
4. FEI Number 59-3040400	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MULLINS, WALTER J
 324 SCHNEIDER DR
 FORT WALTON BEACH, FL 32547

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

Filing Fee is \$61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD MULLINS, WALTER J 324 SCHNEIDER DR. FORT WALTON BEACH, FL 32547
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEE, BILLY 121 SECOND AVE SW FORT WALTON BEACH, FL 32548
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEE, JOYCE 121 SECOND AVE, SW FORT WALTON BEACH, FL 32548
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BELK, EDNA 878 MASTERS BLVD SHALIMAR, FL 32579
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD BLAKERBY, DELIA 510 TRENTON FT WALTON BEACH, FL 32547
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PEYTON, RALPH 13 RANGER ST SW FORT WALTON BEACH, FL 32548

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 02/26/07-80007-010 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: W. J. Mullins **2/11/07** **850-862-2127**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #