

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000019943

FILED  
May 01, 2007  
Secretary of State

Entity Name: EMERALD COAST ENTERPRISES, INC.

## Current Principal Place of Business:

2313 MAGNOLIA DRIVE  
PANAMA CITY BEACH, FL 32408

## New Principal Place of Business:

2283 BUFORD DAM ROAD  
BUFORD, GA 30518

## Current Mailing Address:

2313 MAGNOLIA DRIVE  
PANAMA CITY BEACH, FL 32408

## New Mailing Address:

P.O. BOX 1594  
BUFORD, GA 30515

FEI Number: 59-2259742

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LEDMAN, THOMAS W  
LEDMAN & HAMM, P.A.  
1007 JENKS AVENUE  
PANAMA CITY, FL 32401 US

## Name and Address of New Registered Agent:

DRYER, MARK D ESQ  
747 JENKS AVENUE  
SUITE G  
PANAMA CITY, FL 32401 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: MARK DRYER

05/01/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: LARK, S.P.  
Address: 2313 MAGNOLIA DRIVE  
City-St-Zip: PANAMA CITY, FL 32408

Title: VP ( ) Delete  
Name: SMITH, GREG  
Address: P.O BOX 1594  
City-St-Zip: BUFORD, GA 30515

Title: S ( ) Delete  
Name: HUMPHRIES, LEON  
Address: P.O BOX 969  
City-St-Zip: NORCROSS, GA 30091

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: SMITH, GREG  
Address: P.O. BOX 1594  
City-St-Zip: BUFORD, GA 30515

Title: VP (X) Change ( ) Addition  
Name: HUMPHRIES, LEON  
Address: P.O BOX 1594  
City-St-Zip: BUFORD, GA 30515

Title: S (X) Change ( ) Addition  
Name: HUMPHRIES, LEON  
Address: P.O BOX 1594  
City-St-Zip: BUFORD, GA 30515

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

SIGNATURE: GREG SMITH

P

05/01/2007

Electronic Signature of Signing Officer or Director

Date