

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19545

Entity Name: EMERALD COAST WRITERS, INC.**Current Principal Place of Business:**400 S JEFFERSON ST
SUITE 212
PENSACOLA, FL 32502-5902**Current Mailing Address:**400 S JEFFERSON ST
SUITE 212
PENSACOLA, FL 32502-5902 US**FEI Number:** 59-2762779**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ROBERTS, THOMAS
400 S JEFFERSON ST
SUITE 212
PENSACOLA, FL 32502-5902 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:** THOMAS ROBERTS**02/27/2023**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name ROBERTS, THOMAS
Address 3113 BRITTANY TER
City-State-Zip: PENSACOLA FL 32504

Title SECRETARY
Name RANKIN, KATIE
Address 717 NAGEL DR
City-State-Zip: PENSACOLA FL 32503

Title TREASURER
Name FINELLI, DANIEL SCOTT
Address 1200 CEYLON DR
City-State-Zip: GULF BREEZE FL 32563

Title DIRECTOR
Name BLACK-GOULD, PAT
Address 10116 BRITTERN DR
City-State-Zip: PENSACOLA FL 32507

Title VP
Name BARGER, CHARLINE
Address 5703 SANDSTONE DR
City-State-Zip: PACE FL 32571

Title DIRECTOR
Name O'GARA , LORI
Address 6063 HAMILTON BRIDGE RD
City-State-Zip: PENSACOLA FL 32570

Title DIRECTOR
Name POWELL, JENNIFER
Address 11535 SORRENTO RD
City-State-Zip: PENSACOLA FL 32507

Title DIRECTOR
Name TOKSON, CAROLYN
Address 6630 AMES DR
City-State-Zip: PENSACOLA FL 32504

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: DANIEL SCOTT FINELLI**TREASURER****02/27/2023**

Electronic Signature of Signing Officer/Director Detail

Date