

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000159802

**Entity Name:** EMERALD COAST MARKETING & PUBLISHING LLC

**Current Principal Place of Business:**

4507 FURLING LANE  
SUITE 106  
DESTIN, FL 32541

**Current Mailing Address:**

PO BOX 721  
SHALIMAR, FL 32579

**FEI Number:** 47-2060638

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

GATES, HARRY W  
4507 FURLING LANE  
SUITE 106  
DESTIN, FL 32541 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title AMBR  
Name GATES, HARRY W  
Address 1070 5TH AVE.  
City-State-Zip: SHALIMAR FL 32578

Title AMBR  
Name NACCHIA, JOSEPH JR  
Address 160 BAYWIND DRIVE  
City-State-Zip: NICEVILLE FL 32578

Title AMBR  
Name GATES, BARBARA MARIE  
Address 1070 5TH AVE.  
City-State-Zip: SHALIMAR FL 32579

Title AMBR  
Name NACCHIA, KIMBERLY  
Address 160 BAYWIND DR.  
City-State-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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** HARRY W. GATES

AMBR

02/12/2016

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date