## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

if changed, or on an attac

## May 15, 2006 8:00 am Secretary of State **DOCUMENT # 709593** 1. Entity Name 05-15-2006 90041 017 \*\*\*\*61.25 EMERALD COAST CONCERT ASSOCIATION, INC.,(ECCA) Principal Place of Business Mailing Address P O BOX 815 P O BOX 815 FORT WALTON BEACH FL 32579 FORT WALTON BEACH FL 32579 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E037 (10/05) 1st MOORE Applied For City & State City & State 4. FEI Number 23-7371069 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name NEILL, BETTY J Street Address (P.O. Box Number is Not Acceptable) 128 COUNTRY CLUB ROAD SHALIMAR FL 32579 City Zip Code 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 SIGNATURE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Due By May 1, 2006 Trust Fund Contribution. Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. PD ☐ Delete TITLE ☐ Change TITLE BELCHER, BECKY NAME NAME STREET ADDRESS 715 KATHY AVE STREET ADDRESS FORT WALTON BEACH FL 32547 CITY-ST-7IP CITY-ST-ZIP DVPM DVPM Change ☐ Addition TITLE ☐ Delete TITLE MOORES, HASSELL NAME NAME 110 POINTER LANE STREET ACCRESS STREET ADDRESS CITY-ST-ZIP CRESTVIEW FL 92539. CITY-ST-ZIP TITLE ☐ Delete TITLE BEHNKEN, URSEL NAME NAME STREET ADDRESS STREET ADDRESS 111 CLIFFORD DRIVE SHALIMAR FL 32579 CITY-ST-ZIP CITY-ST-7IP ☐ Change ☐ Addition TITLE ☐ Delete TITLE KNELLER, SUSAN NAME NAME 208 CALHOUN AVENUE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DESTIN FL 32541 CITY-ST-ZIP □ Change ☐ Addition TITLE ☐ Delete NEILL, BETTY J NAME 128 COUNTRY CLUB RD STREET ADDRESS STREET ADDRESS SHALIMAR FL 32579 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Delete TITLE Addition HURD, GORDON NAME NAME 1107 S PALM BLVD STREET ADDRESS STREET ADDRESS NICEVILLE FL 32578 CITY-ST-ZIP CITY-ST-71P 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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

**FILED**