## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000006571

Entity Name: EMERALD LADY, INC. OF THE VIRGIN ISLANDS

FILED Feb 15, 2006 Secretary of State

416 GREENE STREET 4507 POTTERY PLACE KEY WEST, FL 33040 DESTIN, FL 32541

Current Mailing Address: New Mailing Address:

416 GREENE STREET P.O. BOX 5347 KEY WEST, FL 33040 PESTIN, FL 32540

FEI Number: 66-0497707 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

DAVIS, PRISCILLA
416 GREENE STREET
KEY WEST, FL 33040 US

DAVIS, PRISCILLA
4507 POTTERY PLACE
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: PRISCILLA DAVIS 02/15/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCT ( ) Delete Title: PCT (X) Change ( ) Addition Name: DAVIS, LINDA P Name: DAVIS, LINDA P Address: 416 GREENE STREET Address: 1204 LEON STREET

KEY WEST, FL 33040 Address: 1204 LEON STREET

KEY WEST, FL 33040 City-St-Zip: KEY WEST, FL 33040

Title: VSD Title: VSD (X) Change ( ) Addition () Delete DAVIS, PRISCILLA L Name: Name: DAVIS, PRISCILLA L 416 GREENE STREET 4507 POTTERY PLACE Address: Address: KEY WEST, FL 33040 DESTIN, FL 32541 City-St-Zip: City-St-Zip:

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 DAVIS, WILLIAM P
 Name:

 Address:
 3582 MEADOWBROOK
 Address:

 City-St-Zip:
 CLEVELAND, OH 44112
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: PRISCILLA DAVIS VSD 02/15/2006