FILE NOW: FILING FEE AFTER MAY 1 IS \$550

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT

Sandra B. Morth

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # L34784

(3)

PERSONNEL POOL OF THE EMERALD COAST, INC.

| FILED | | | | | | | | | |
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| Jan 29 1997 8:00am | | | | | | | | | |
| Secretary of State | | | | | | | | | |



| Principal Plac | e of Business | Mail-ng Address | | | | | | | |
|-------------------------|--|---------------------------------------|-------------------------|--------------|--|--|----------------------------------|-----------|---------------|
| % GERALD L. BROWN | | 4400 BAYOU BLVD | | | | | | | |
| 25-A PENSACOLA F | FL 32503 | 25-A PENSACOLA FL 32503-2673 US | | | | | | | |
| US | | | | | 3. Date Incorporated or Qualified 12/04/1989 | | Date of Last Report 2/05/1996 | | |
| · | lace of Business | 2a. Mailing Address | | | | 4. FEI Number | | | Applied For |
| 21 | | 26 | | | | 59-2980115 | | | Not Applicabl |
| Suite, Apt. | | Suite, Apt. #, etc. | | | | 5. Certificate of Status Dosired See Requir | | | |
| City & State | | City & State | | | | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees | | | |
| Zip | Country | Zip | Countr | У | | 8. This corporation has liability for in | ntangible | tax under | s 199.032, |
| 24 | 25 | | 30 | | | Florida Statules | _ | No | |
| | 9. Name and Address of Current | Registered Agent | | . 1 | Name | 10. Name and Address of New Reg | Istered | Agent | |
| | RWICK, SHARON | | 81 | ' | Name | | | | |
| | O BAYOU BLVD | 82 Stree | | Street Addic | ess (P.O. Box Number is Not Acceptabl | e) | | | |
| | TE 25-A | | 83 | <u>.</u> | | | | | |
| PEN | ISACOLA FL 32503 | | | | | | | | |
| | | | 84 | 4 | City | | FL | 85 Zu | p Code |
| agent. I a SIGNATURE | an familiar with, and accept the obligation of repoteed agen OFFICERS AND | and the thapplicable (NOH | | | | oration submits this statement for the provision and of directors. I hereby accept a which reinstating). ADDITIONS/CHANGES TO OFFICE. | DÄT | | |
| TITLE | PT | DELETE | 1 1 10LE | | | ABBITIONO/OFFANGES TO OFFTO | - III AII | Change | |
| NAME | BARWICK, SHARION | | 1.2 NAME | | | | | | |
| STREET ADDRESS | 4400 BAYOU BLVD SUITE 16A | | 13 STREE | | DDRESS | | | | |
| CITY-ST-ZIP | PENSACOLA FL | | 14 CITY - | | | | | | |
| TITLE | VPS | DELETE | 2:101.1 | | | | | Change | e 🔲 Additio |
| NAME | BARWICK, JOHN | | 2.2 NAME | | | | | | |
| STREET ADDRESS | 4400 BAYOU BLVD SUTIE 16A | | 2.3 STREE | I A | DDRESS | | | | |
| CITY-ST-ZIP | PENSACOLA FL | | 2.4 CilY- | -\$1 | - 70P | | | | |
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| NAME | | | 3.2 NAME | | | | | | |
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| NAME | | | 4 2 NAME | | | | | | |
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| TITLE | | [_] /(H II | 5.1 THEF | | | | | L OHARR | · Manina |
| NAME STORET ADDRESS | | | 5.2 NAME | | INDELSE | | | | |
| STREET ADDRESS | | | 5.3 STREE | | 1 | | | | |
| CITY-ST-ZIP TITLE | | DELETE | 5.4 CITY - 6.1 THI E | 51- | - I) , | | | Change | e 🔲 Additio |
| NAME | | L. DECERE | 6.2 NAME | | | | | | |
| STREET ADDRESS | | | 6.3 STRLE | | IDDRESS | | | | |
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| CITY-ST-ZIP | Ī | | 6.4 CITY- | · 51 - | - Z-I' | | | | |

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

CIGNATUDE.

Mayor Branish sugar

V 1-24-07

V governo area