

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2006 8:00 am
Secretary of State

04-20-2006 90217 015 ****61.25

DOCUMENT # N02000008619

1. Entity Name
EMERALD COAST WRITERS, INC.



Principal Place of Business
112 MICHAEL AVE
FORT WALTON BEACH, FL 32547

Mailing Address
P.O. BOX 6502
DESTIN, FL 32550

00014286

2. Principal Place of Business

2059 Crystal Lake Dr
Suite, Apt. #, etc.

3. Mailing Address

PO Box 6502
Suite, Apt. #, etc.

03282006 Chg-NP CR2E037 (11/05)

City & State
Sandestin, FL

City & State
Destin, FL

4. FEI Number
30-0119687

Applied For
Not Applicable

Zip
32550

Country
Walton

Zip
32550

Country
Walton

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MCINERNEY, FUSCHSIA
112 MICHAEL AVE
FORT WALTON BEACH, FL 32547

7. Name and Address of New Registered Agent

Name Charles Germano
Street Address (P.O. Box Number is Not Acceptable)
2059 Crystal Lake Dr
City Sandestin FL Zip Code 32550

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 the obligations of registered agent.

SIGNATURE

Charles Germano

Charles Germano

4/14/06

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE P
NAME MCINERNEY, FUCHIA ☒ Delete
STREET ADDRESS 112 MICHAEL AVE
CITY-ST-ZIP FORT WALTON BEACH, FL 32547

TITLE V
NAME GERMANO, CHARLES ☐ Delete
STREET ADDRESS 2059 CRYSTAL LAKE DR
CITY-ST-ZIP SANDESTIN, FL 32550

TITLE S
NAME TREADWAY, SHERRY ☒ Delete
STREET ADDRESS 86 RODNEY
CITY-ST-ZIP FREEPORT, FL 32439

TITLE T
NAME BROWN, MARY ☐ Delete
STREET ADDRESS 4644 PARADISE ISLE
CITY-ST-ZIP DESTIN, FL 32541

TITLE D
NAME DEAN, DARLENE ☒ Delete
STREET ADDRESS 829 HOLBROOK CIRCLE
CITY-ST-ZIP FORT WALTON BEACH, FL 32547

TITLE D
NAME MARCOLONGO, SHERRY ☒ Delete
STREET ADDRESS 1506 23RD STREET
CITY-ST-ZIP NICEVILLE, FL 32578

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P
NAME Germano, Charles ☒ Change ☐ Addition
STREET ADDRESS 2059 Crystal Lake Dr.
CITY-ST-ZIP Sandestin, FL 32550

TITLE V
NAME Grafton, Charlene ☐ Change ☒ Addition
STREET ADDRESS 49 Marina Cove Dr. Apt # 211
CITY-ST-ZIP Niceville, FL 32578

TITLE S
NAME VACANT ☐ Change ☐ Addition

TITLE T
NAME SAME ☐ Change ☐ Addition

TITLE D
NAME Campbell, Jan ☐ Change ☒ Addition
STREET ADDRESS PO Box 4246
CITY-ST-ZIP Ft. Walton Bch, Fla 32549

TITLE D
NAME Sherrow, Gary ☐ Change ☐ Addition
STREET ADDRESS PO Box 4013
CITY-ST-ZIP Ft. Walton Beach, FL 32547

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Charles Germano

4/14/06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #