2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 05, 2011
Secretary of State

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Entity Name: EMERALD COAST ARCHAEOLOGY SOCIETY, INC.

Current Principal Place of Business:

EMERALD COAST ARCHAEOLOGY SOCEITY INC.
139 MIRACLE STRIP PARKWAY SE
FORT WALTON BEACH, FL 32548

New Principal Place of Business:

Current Mailing Address:

EMERALD COAST ARCHAEOLOGY SOCEITY INC.
139 MIRACLE STRIP PARKWAY SE
FORT WALTON BEACH, FL 32548

New Mailing Address:

FEI Number: 54-2083669 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LUCAS, BILLY F
BILLY F. LUCAS
333 PERSIMMON ST.
FREEPORT, FL 32439 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD
Name: BALAJNZATEGUI, PATRICIA
Address: 169 MONAHAN DR
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: VD
Name: PRYOR, FRED
Address: 621 WEST MIRACLE PARKWAY
City-St-Zip: MARY ESTER, FL 32569

Title: DS
Name: LUCAS, BILLY F
Address: 333 PERSIMMON STREET
City-St-Zip: FREEPORT, FL 32439

Title: TD
Name: VAUGHAN, JOHN M
Address: 307 ELDREDGE ROSD
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: D
Name: DAYTON, JACK
Address: PO BOX 893
City-St-Zip: NICEVILLE, FL 32588

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 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 above, or on an attachment with all other like empowered.

SIGNATURE: JOHN M. VAUGHAN TD 01/05/2011
Electronic Signature of Signing Officer or Director — Date