

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2006 8:00 am
Secretary of State

03-23-2006 90004 046 ****70.00

DOCUMENT # N03000001363					
1. Entity Name EMERALD COAST APARTMENT ASSOCIATION OF NORTHWEST FLORIDA, INC.					
Principal Place of Business P O BOX 11937 PENSACOLA, FL 32524-1937			Mailing Address P O BOX 11937 PENSACOLA, FL 32524-1937		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 55-0817955	
5. Certificate of Status Desired <input checked="" type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
AARON, MICHELLE M 6256 BILLOREE RD PACE, FL 32571			Name Street Address (P.O. Box Number is Not Acceptable) City <div style="text-align: right;"> FL </div> 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 the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SWANSON, CAROLEEN M 940 SANTA ROSA BLVD FORT WALTON BEACH, FL 32548	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HENDERSON, AUTUMN 9890 NORTH LOOP RD #117 PENSACOLA, FL 32507	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD AARON, MICHELLE M 8917 N DAVIS HWY PENSACOLA, FL 32514	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SCHWOCHERT, ELIANE E 4836 PINE VILLA CIRCLE PACE, FL 32571	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D THOMPSON, LYNNE 3892 N. DAVIS HWY PENSACOLA, FL 32503	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BOEHME, ARLAN 1201 AIRPORT BLVD. PENSACOLA, FL 32504	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Swanson, Caroleen M 940 Santa Rosa Blvd Fort Walton Beach, FL 32548	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Kelly Diamond 6115 N. Davis Hwy Pensacola, FL 32504	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/D Michelle M. Aaron 6256 Billoree Road Pace, FL 32571	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T/D Schwochert, Elaine E. 161 Boone Street, #203-A Pensacola, FL 32505	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Thompson, Lynne 2466 Pine Forest Road Cantonment, FL 32533	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Linda Mense 4301 Creighton Road Pensacola, FL 32504	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
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: <i>Elaine Schwochert</i>		3/24/06 850-432-7233			
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date Daytime Phone #</small>			

ATTACHMENT

2006 Not-For-Profit Corporation Annual Report 10. 11. Officers and Directors - Continued

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10. Officers and Directors - Continued			11. Additions/Changes to Officers and Directors In 10		
Title	D	<input type="checkbox"/> Delete	Title	VP/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
Name	Doyle, Willi		Name	Doyle, Willi	
Street Address	1600 Governors Drive		Street Address	1600 Governors Drive	
City ST Zip	Pensacola, FL 32514		City ST Zip	Pensacola, FL 32514	
Title	D	<input type="checkbox"/> Delete	Title		<input type="checkbox"/> Change <input type="checkbox"/> Addition
Name	Krendick, Shelly		Name		
Street Address	2355 W. Michigan Ave. #O-4		Street Address		
City ST Zip	Pensacola, FL 32526		City ST Zip		
Title	D	<input type="checkbox"/> Delete	Title		<input type="checkbox"/> Change <input type="checkbox"/> Addition
Name	Davis, Tammy		Name		
Street Address	1003 N. 12th Ave.		Street Address		
City ST Zip	Pensacola, FL 32501		City ST Zip		
Title	D	<input type="checkbox"/> Delete	Title	P/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
Name	McLemore, Lisa		Name	McLemore, Lisa	
Street Address	3390 Shannon Place		Street Address	8917 N. Davis Highway, Apt 39	
City ST Zip	Pensacola, FL 32504		City ST Zip	Pensacola, FL 32514	
Title	D	<input checked="" type="checkbox"/> Delete	Title	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
Name	Kim Whisenhunt		Name	Roy Greene	
Street Address	2220 Gloria Circle		Street Address	2205 LaVista Ave	
City ST Zip	Pensacola, FL 32514		City ST Zip	Pensacola, FL 32504	