

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001363

FILED
Apr 24, 2012
Secretary of State

Entity Name: EMERALD COAST APARTMENT ASSOCIATION OF NORTHWEST FLORIDA, INC.

Current Principal Place of Business:

940 SANTA ROSA BLVD
FORT WALTON BEACH, FL 32548

New Principal Place of Business:

Current Mailing Address:

P O BOX 11937
PENSACOLA, FL 325241937

New Mailing Address:

FEI Number: 55-0817955

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POOLE, LEE ANN
940 SANTA ROSA BLVD
FORT WALTON BEACH, FL 32548 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: FERGUSON, TIFFANY
Address: 4470 SPANISH TRL
City-St-Zip: PENSACOLA, FL 32504

Title: 1VPD
Name: BROWN, WHITNEY
Address: 237 HALLS MILL CREEK BUS. CTR BLDG D STE C
City-St-Zip: MOBILE, AL 36619

Title: 2VPD
Name: SMITH, AMY
Address: 6030 HILBURN RD
City-St-Zip: PENSACOLA, FL 32504

Title: SD
Name: DIAMOND, KELLY
Address: 6115 N DAVIS HWY.
City-St-Zip: PENSACOLA, FL 32504

Title: TD
Name: KENT, JEFF
Address: 711 UNDERWOOD AVE.
City-St-Zip: PENSACOLA, FL 32504

Title: PPD
Name: POOLE, LEE ANN
Address: 940 SANTA ROSA BLVD
City-St-Zip: FORT WALTON BEACH, FL 32548

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: JEFFREY M KENT

TD

04/24/2012

Electronic Signature of Signing Officer or Director

Date