

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Oct 26, 2009
Secretary of State

DOCUMENT# N03000002990

Entity Name: EMERALD COAST SWIMMING BOOSTER CLUB INC.**Current Principal Place of Business:**204 BUCK DRIVE
FORT WALTON BEACH, FL 32548**New Principal Place of Business:****Current Mailing Address:**204 BUCK DRIVE
FORT WALTON BEACH, FL 32548**New Mailing Address:****FEI Number:** 56-2358198**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**STROM, TRACY
204 BUCK DRIVE
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:** S () Delete
Name: KRIST, NORA
Address: 21 KRISTIN CIRCLE
City-St-Zip: NICEVILLE, FL 32578**Title:** T () Delete
Name: PHILLPOTT, GETHYN
Address: 4211 ALLIGATOR POINT
City-St-Zip: NICEVILLE, FL 32578**Title:** P () Delete
Name: HEAPY, KATHI
Address: 51 MEIGS DRIVE
City-St-Zip: SHALIMAR, FL 32579**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** S (X) Change () Addition
Name: REYNOLDS, DIANE
Address: 538 MOONEY ROAD
City-St-Zip: FORT WALTON BEACH, FL 32547**Title:** T (X) Change () Addition
Name: HEAPY, KATHLEEN
Address: 51 MEIGS DRIVE
City-St-Zip: SHALIMAR, FL 32579**Title:** P (X) Change () Addition
Name: HACKLER, MIKYONG
Address: 419 NATHEY STREET
City-St-Zip: NICEVILLE, FL 32578**Title:** VP () Change (X) Addition
Name: BARTLEY, JOANNE
Address: 40 SOUTHWIND COURT
City-St-Zip: NICEVILLE, FL 32578

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: KATHLEEN M. HEAPY

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10/26/2009

Electronic Signature of Signing Officer or Director

Date