

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000000617

FILED  
Apr 25, 2005  
Secretary of State

Entity Name: EMERALD COAST REEF ASSOCIATION INC.

## Current Principal Place of Business:

1781 UNION AVE  
NICEVILLE, FL 32578 US

## New Principal Place of Business:

## Current Mailing Address:

1781 UNION AVE  
NICEVILLE, FL 32578 US

## New Mailing Address:

FEI Number: 20-0622053

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PARSONS, GARY H  
1781 UNION AVE  
NICEVILLE, FL 32578 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: DIR ( ) Delete  
Name: SMITH, JASON T  
Address: 1901 ESTIVAL ST.  
City-St-Zip: FORT WALTON BEACH, FL 32547 US

Title: DIR ( ) Delete  
Name: DAVIS, GLENN M  
Address: 204 WALKER CIRCLE W  
City-St-Zip: CRESTVIEW, FL 32539 US

Title: DIR ( ) Delete  
Name: PARSONS, GARY H  
Address: 1781 UNION AVE  
City-St-Zip: NICEVILLE, FL 32578 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIR (X) Change ( ) Addition  
Name: SMITH, JASON T  
Address: 17830 FOSTERS RD  
City-St-Zip: MOSS POINT, MS 39562 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: PRES (X) Change ( ) Addition  
Name: PARSONS, GARY H  
Address: 1781 UNION AVE  
City-St-Zip: NICEVILLE, FL 32578 US

Title: TREA ( ) Change (X) Addition  
Name: CROSBY, KENNETH A  
Address: 1239 CHANTILLY CIRCLE  
City-St-Zip: NICEVILLE, FL 32578 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: GARY H PARSONS

PRES

04/25/2005

Electronic Signature of Signing Officer or Director

Date