2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009355

FILED Mar 24, 2009 Secretary of State

Entity Name: THE ESTATE PLANNING COUNCIL OF THE EMERALD COAST, INC.

Current Principal Place of Business: New Principal Place of Business:

4475 LEGENDARY DRIVE 4460 LEGENDARY DRIVE DESTIN, FL 32541

SUITE 100

DESTIN, FL 32541

Current Mailing Address: New Mailing Address:

P.O. BOX 5095 P.O. BOX 784 BLUEWATER BAY, FL 32578 DESTIN, FL 32540

FEI Number: 20-1477697 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

HAVENS, JASON E HAVENS, JASON E 4400 EAST HIGHWAY 20 4421 COMMONS DRIVE EAST SUITE 211 **BOX 162**

NICEVILLE, FL 32578 US DESTIN, FL 32541 US

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: 03/24/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

HAWKINS, JOHN WALKER, JASON Name: Name: 4475 LEGENDARY DRIVE Address: PO BOX 469 Address: City-St-Zip: DESTIN, FL 32541 City-St-Zip: BREWTON, AL 36427

Title: () Delete Title: (X) Change () Addition

Name: WEITMAN, MICAHEL Name: MARSHALL, JOHN

Address: 2000 NINETY-EIGHT PALMS BLVD. Address: 2000 NINETY-EIGHT PALMS BLVD., SUITE 110 City-St-Zip:

DESTIN, FL 32541 City-St-Zip: DESTIN, FL 32541

Title: () Delete Title: (X) Change () Addition MULDOWNEY, DEANNA L Name: DEMARS, ROBERT Name:

4460 LEGENDARY DR., SUITE 100 81 BUD'S LANE, SUITE 3 Address: Address: City-St-Zip: DESTIN, FL 32541 City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: () Delete Title: (X) Change () Addition

Name: WHITEMAN, DANE Name: SIMMONS, SHAYLA

4460 LEGENDARY DR ., SUITE 100 4460 LEGENDARY DR., SUITE 100 Address: Address:

City-St-Zip: DESTIN, FL 32541 City-St-Zip: DESTIN, FL 32541

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: SHAYLA SIMMONS Т 03/24/2009