


# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 18, 2008 8:00 am**  
**Secretary of State**

04-18-2008 90023 001 \*\*\*\*61.25

<b>DOCUMENT # N06000001545</b> 1. Entity Name <b>UNITED STATES LIFESAVING ASSOCIATION EMERALD COAST CHAPTER, INC.</b>					
Principal Place of Business <b>209 CHASE RUN DESTIN, FL 32550</b>			Mailing Address <b>209 CHASE RUN DESTIN, FL 32550</b>		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
<b>SCHEYD, JOSEPH M JR</b> <b>1221 AIRPORT ROAD</b> <b>SUITE 209</b> <b>DESTIN, FL 32541</b>				Name  Street Address (P.O. Box Number is Not Acceptable)   City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>	
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 _____ (NOTE: Registered Agent signature required when translating) <small>Signature, typed or printed name of registered agent and title if applicable. DATE</small>					
<b>Filing Fee is \$61.25</b> <b>Due by May 1, 2008</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be</b> <b>Added to Fees</b>	
<b>Make check payable to</b> <b>Florida Department of State</b>					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	P <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	<b>WISE, GARY</b>	NAME			
STREET ADDRESS	<b>209 CHASE RUN</b>	STREET ADDRESS			
CITY-ST-ZIP	<b>DESTIN, FL 32541</b>	CITY-ST-ZIP			
TITLE	V <input checked="" type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	<b>HUGHES, SEAN</b>	NAME	<b>D'Agostino, Joseph</b>		
STREET ADDRESS	<b>230 WINSTON MANNER ROAD</b>	STREET ADDRESS	<b>848 Airport Rd</b>		
CITY-ST-ZIP	<b>SANTA ROSA BEACH, FL 32459</b>	CITY-ST-ZIP	<b>Destin, FL 32541</b>		
TITLE	SEC <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	<b>MEADOWS, DAVE</b>	NAME			
STREET ADDRESS	<b>#9 GIPSON PLACE</b>	STREET ADDRESS			
CITY-ST-ZIP	<b>FORT WALTON BEACH, FL 32548</b>	CITY-ST-ZIP			
TITLE	T <input checked="" type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	<b>D'AGOSTINO, JOSEPH</b>	NAME	<b>Tracey Vause</b>		
STREET ADDRESS	<b>848 AIRPORT ROAD</b>	STREET ADDRESS	<b>611th Ave Suite G-1</b>		
CITY-ST-ZIP	<b>DESTIN, FL 32541</b>	CITY-ST-ZIP	<b>Shalimar FL 32579</b>		
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
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.					
<b>SIGNATURE:</b> <u>Tracey Vause</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<u>Tracey Vause (Treasurer)</u> <small>Date</small>		<u>4-10-2008</u> <small>Daytime Phone #</small>	
<u>(850) 609-5111</u> <small>Daytime Phone #</small>					