

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000005576

FILED
Apr 27, 2007
Secretary of State

Entity Name: EMERALD COAST CHAPTER OF AUVSI, INC.

Current Principal Place of Business:

P.O.BOX 1185
NICEVILLE, FL 32588

New Principal Place of Business:

1439 LIVE OAK ST
SUITE C
NICEVILLE, FL 32588

Current Mailing Address:

P.O.BOX 1185
NICEVILLE, FL 32588

New Mailing Address:

FEI Number: 55-0859858 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FRIERE, LARRY D JR.
1207 WINDWARD CIR
NICEVILLE, FL 32578 US

Name and Address of New Registered Agent:

FRIESE, LARRY D JR.
1439 LIVE OAK ST.
SUITE C
NICEVILLE, FL 32578 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: LARRY D FRIESE JR

04/27/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ADSIT, PHILIP
Address: P.O.BOX 1185
City-St-Zip: NICEVILLE, FL 32588

Title: D () Delete
Name: RAJ, ANIL
Address: P.O.BOX 1185
City-St-Zip: NICEVILLE, FL 32588

Title: D () Delete
Name: BLACK, SHAWN
Address: P.O.BOX 1185
City-St-Zip: NICEVILLE, FL 32588

Title: P () Delete
Name: SKIBBA, BRIAN
Address: P.O.BOX 1185
City-St-Zip: NICEVILLE, FL 32588

Title: V () Delete
Name: BISHOP, STEPHEN
Address: P.O.BOX 1185
City-St-Zip: NICEVILLE, FL 32588

Title: S () Delete
Name: FRIESE, LARRY
Address: P.O.BOX 1185
City-St-Zip: NICEVILLE, FL 32588

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: P (X) Change () Addition
Name: ERNST, RICHARD
Address: P.O.BOX 1185
City-St-Zip: NICEVILLE, FL 32588

Title: V (X) Change () Addition
Name: ERNST, RICHARD
Address: P.O.BOX 1185
City-St-Zip: NICEVILLE, FL 32588

Title: S (X) Change () Addition
Name: AUSTERMAN, BRAD
Address: P.O.BOX 1185
City-St-Zip: NICEVILLE, FL 32588

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: GARY WOLLAM

T

04/27/2007

Electronic Signature of Signing Officer or Director

Date