

2013 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000005576

FILED
May 10, 2013
Secretary of State

Entity Name: EMERALD COAST CHAPTER OF AUVSI, INC.

Current Principal Place of Business:

4399 WINDRUSH DR
NICEVILLE, FL 32578

New Principal Place of Business:

40 SOUTH ALCANIZ STREET
FL INSTITUTE FOR HUMAN & MACHINE COGNITION
PENSACOLA, FL 32502

Current Mailing Address:

P.O. BOX 1894
PENSACOLA, FL 32591

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:

FRIESE, LARRY D JR
4399 WINDRUSH DRIVE
NICEVILLE, FL 32578 US

Name and Address of New Registered Agent:

DAWSON, JOHN F
7104 LAIRD STREET
PANAMA CITY, FL 32408 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: JOHN F. DAWSON

05/10/2013

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: RAJ, ANIL
Address: P.O. BOX 1894
City-St-Zip: PENSACOLA, FL 32591

Title: VP/S
Name: AUSTERMAN, BRADLEY
Address: P.O. BOX 1894
City-St-Zip: PENSACOLA, FL 32591

Title: T
Name: DAWSON, JOHN
Address: P.O. BOX 1894
City-St-Zip: PENSACOLA, FL 32591

Title: D
Name: BLACKBURN, KEN
Address: P.O. BOX 1894
City-St-Zip: PENSACOLA, FL 32578

Title: D
Name: HEISE, SHARON
Address: P.O. BOX 1894
City-St-Zip: PENSACOLA, FL 32591

Title: D
Name: ROGACKI, JOHN
Address: P.O. BOX 1894
City-St-Zip: PENSACOLA, FL 32591

I hereby 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 all other like empowered.

SIGNATURE: JOHN F. DAWSON

T

05/10/2013

Electronic Signature of Signing Officer or Director

Date