

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000000578

FILED
Jun 17, 2008
Secretary of State

Entity Name: EMERALD COAST HASH HOUSE HARRIERS CORP.

Current Principal Place of Business:

17 WINFIELD WAY
MARY ESTHER, FL 32569

New Principal Place of Business:

Current Mailing Address:

17 WINFIELD WAY
MARY ESTHER, FL 32569

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

HAYES, RUTH A
734 LEGION DR.
67
DESTIN, FL 32541 US

Name and Address of New Registered Agent:

BROWNFIELD, STACY
17 WINFIELD WAY
MARY ESTHER, FL 32569 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: STACY BROWNFIELD

06/17/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WALKER, MICHAEL P
Address: 2329 MARY ANNE CIRCLE
City-St-Zip: NAVARRE, FL 32566

Title: V () Delete
Name: HAYES, KRISTINA M
Address: 734 LEGION DR #67
City-St-Zip: DESTIN, FL 32541

Title: ST (X) Delete
Name: HAYES, RUTH A
Address: 734 LEGION DR. #67
City-St-Zip: DESTIN, FL 32541

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BROWNFIELD, STACY
Address: 17 WINFIELD WAY
City-St-Zip: MARY ESTHER, FL 32569

Title: T (X) Change () Addition
Name: BROWNFIELD, ROBERT P
Address: 17 WINFIELD WAY
City-St-Zip: MARY ESTHER, FL 32569

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

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: STACY BROWNFIELD

P

06/17/2008

Electronic Signature of Signing Officer or Director

Date