2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000004986

FILED May 22, 2009 Secretary of State

Entity Name: FISHER HOUSE OF THE EMERALD COAST, INC.

Current Principal Place of Business:		New Prince	New Principal Place of Business:	
307 BOATI SUITE 114	NER ROAD			
	B, FL 32542 US			
Current M	lailing Address:	New Maili	ng Address:	
PO BOX 2 EGLIN AFE	2007 B, FL 32542 US			
In accordan	: 26-0283970 FEI Number Applied For() F ce with s. 607.193(2)(b), F.S., the corporation did not red I Address of Current Registered Agent:	· ·	• • • • • • • • • • • • • • • • • • • •	
OXLEY, JC 17 BALMO NICEVILLE The above	DEL M DRAL DRIVE E, FL 32578 US named entity submits this statement for the purp			
	e of Florida.			
SIGNATUF	Electronic Signature of Registered Agent		Date	
OFFICERS AND DIRECTORS:		ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PRES () Delete HUGHES, A ANTHONY 2733 CREEKS EDGE LANE NAVARRE, FL 32566 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DIR () Delete OXLEY, JOEL M 17 BALMORAL DRIVE NICEVILLE, FL 32578 US	Title: Name: Address: City-St-Zip:	VP (X) Change () Addition OXLEY, JOEL M 17 BALMORAL DRIVE NICEVILLE, FL 32578 US	
Title: Name: Address: City-St-Zip:	TREA () Delete KEMP, THERESA D 451 ANDREW DRIVE VALPARAISO, FL 32580 US	Title: Name: Address: City-St-Zip:	TREA (X) Change () Addition WUNKER, BRANDY L 3294 ANDY LANE CRESTVIEW, FL 32539 US	
Title:	SEC (X) Delete RENNIE, ROBERT J	Title: Name:	() Change () Addition	
Name: Name: Address: City-St-Zip:	75 11TH STREET SHALIMAR, FL 32579 US	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: BRANDY WUNKER TREA 05/22/2009