# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**May 08, 2009**
**Secretary of State**

DOCUMENT# N07000008909

**Entity Name:** EMERALD COAST THEATRE, INC.

**Current Principal Place of Business:**

4706 GRANT'S MILL DRIVE
LYNN HAVEN, FL 32444 US

**New Principal Place of Business:**

**Current Mailing Address:**

4706 GRANT'S MILL DRIVE
LYNN HAVEN, FL 32444 US

**New Mailing Address:**

**FEI Number: 26-0872715** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **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:**

JORDAN, GEORGE M
4706 GRANT'S MILL DRIVE
LYNN HAVEN, FL 32444 US

**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent — Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete
Name: JORDAN, GEORGE M
Address: 4706 GRANT'S MILL DRIVE
City-St-Zip: LYNN HAVEN, FL 32444 US

Title: VP ( ) Delete
Name: GOEDE, GORDON A
Address: 4706 GRANT'S MILL DRIVE
City-St-Zip: LYNN HAVEN, FL 32444 US

Title: S/T ( ) Delete
Name: ANDERSSON, JUSTIN
Address: 711 FLORIDA AVE
City-St-Zip: PANAMA CITY, FL 32401 US

**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:

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: GEORGE M. JORDAN P 05/08/2009

Electronic Signature of Signing Officer or Director — Date