

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31195

FILED
Feb 24, 2009
Secretary of State

Entity Name: EMERALD COAST REGIONAL MUSTANG CLUB, INCORPORATED

Current Principal Place of Business:

GARY SMITH FORD ATTN: ERCMC
#1 BEAL PARKWAY
FORT WALTON BEACH, FL 32548 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 4431
FORT WALTON BEACH, FL 32549 US

New Mailing Address:

FEI Number: 62-1629070 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

O'NEIL, BRIAN
7394 MANATEE STREET
NAVARRE, FL 32566 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: BROWN, RANDALL
Address: 703 JAMES COURT
City-St-Zip: FT WALTON BEACH, FL 32547

Title: V () Delete
Name: GRATER, RAY
Address: ROUTE 3 #2 ENDA LANE
City-St-Zip: MARY ESTHER, FL 32569

Title: ST () Delete
Name: ONEIL, BRIAN
Address: 7394 MANATEE ST
City-St-Zip: NAVARRE, FL 32566

Title: BM () Delete
Name: KEENEY, EDWARD
Address: 1579 UENICE AVE
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: BM () Delete
Name: SCHINSTINE, BILL
Address: 2259 PALOMA ST
City-St-Zip: NAVARRE, FL 32566

Title: BM () Delete
Name: GODOY, DAVID
Address: 7372 GORDON EVANS ROAD
City-St-Zip: NAVARRE, FL 32566

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: KERWOOD, KARA
Address: 7498 MANATEE ST.
City-St-Zip: NAVARRE, FL 32566

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

Title: BM (X) Change () Addition
Name: HALL, BILL
Address: 600 LEE ST.
City-St-Zip: FORT WALTON BEACH, FL 32547

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: BRIAN O'NEIL

Electronic Signature of Signing Officer or Director

MR.

02/24/2009

Date