2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 11, 2008 8:00 am
Secretary of State
04-11-2008 90044 046 ****61.25

DOCUMENT # N44861

1. Entity Name

THE EMERALD COAST SCIENCE CENTER, INC.

Principal Place of Business	Mailing Address
139 BROOKS STREET FT. WALTON BCH. FL 32548	139 BROOKS STREET FT. WALTON BCH. FL 32548

1st MOORE CR2E037 (10/07)

2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-3317924 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
FLEET, H B FLEET, SPENCER, MARTIN & KILPATRICK, PA 1104 EGLIN PARKWAY SHALIMAR FL 32579-0000	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25
Due By May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPBD VAUGHN, CHRIS P.O. BOX 1089 FREEPORT FL 32439	☑ Delete	VPBD DR. Thomas Gilbar 1107 Courington Court Niceville, Florida 32578	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PBD BRATHWAITE, DAVID MR 198 EGLIN PARKWAY FORT WALTON BEACH FL 32548	☑ Delete	PBD MR. Chris Vaughn P.O. Box 1089 Freeport, Florida 32439	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PEM PRICE, DAVID MR. 51 3RD STREET, BUILDING 11 PO BOX 776 SHALIMAR FL 32579	☑ Delete	PEM MR. David Braithwaite 198 Eglin Parkway Fort Walton Beach, Florida 32548	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T GILBAR, THOMAS MR 1107 COURINGTON COURT NICEVILLE FL 32578	☑ Delete	T Ms. Valerie Chubb 110 Race Track Road Fort Walton Beach, Florida 32548	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ED GASKIN, ROBERT MR. 139 BROOKS STREET FORT WALTON BEACH FL 32548	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SED VAN VALKENBURG, GRETCHEN 1170 MARTIN LUTHER KING BLVD. FORT WALTON BEACH FL 32548	☑ Delete	SED DR. Tommy Fairweather 6694 W. County Hwy. 30A Santa Rosa Beach, Florida 32459	☑ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Title Date (mm/dd/yyyy)