

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47306

FILED
Jan 10, 2006
Secretary of State

Entity Name: EMERALD COAST SAILING ASSOCIATION, INC.

Current Principal Place of Business:

36474 EMERALD COAST PARKWAY
SUITE 1201
DESTIN, FL 32541

New Principal Place of Business:

Current Mailing Address:

36474 EMERALD COAST PARKWAY
SUITE 1201
DESTIN, FL 32541

New Mailing Address:

FEI Number: 59-3117735

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOWYER, KEVIN D
36474 EMERALD COAST PKWY
DESTIN, FL 32541 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: D () Delete
Name: BROWN, MARSHALL,
Address: 307 MONAHAN DRIVE
City-St-Zip: FT. WALTON BEACH, FL

Title: T () Delete
Name: BOWYER, KEVIN D
Address: 36474 EMERALD COAST PKWY
City-St-Zip: DESTIN, FL 32541

Title: P () Delete
Name: GOODALL, GEORGE,
Address: 25 POPLAR AVE.
City-St-Zip: SHALIMAR, FL

Title: S () Delete
Name: SEATON, SHARI
Address: 106 NE OREGON COURT
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: D () Delete
Name: COOKE, DARREN
Address: 29 JAPONICA LANE
City-St-Zip: SHALIMAR, FL 32579

Title: D () Delete
Name: ANDERS, GREG
Address: 219 WAVA AVE
City-St-Zip: NICEVILLE, FL 32578

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:

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 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: KEVIN D. BOWYER

T

01/10/2006

Electronic Signature of Signing Officer or Director

Date