

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Feb 15, 2011
Secretary of State

Entity Name: EMERALD COAST WILDLIFE REFUGE, INC.

Current Principal Place of Business:

406 MOUNTAIN DR
DESTIN, FL 32541

New Principal Place of Business:

105 SANTA ROSA BLVD.
FORT WALTON BEACH, FL 32548

Current Mailing Address:

406 MOUNTAIN DR
DESTIN, FL 32541

New Mailing Address:

105 SANTA ROSA BLVD.
FORT WALTON BEACH, FL 32548

FEI Number: 59-3286744

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILKERSON, AMANDA G
220 FLIVA AVE.
FORT WALTON BEACH, FL 32548 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: PRES
Name: MELVIN, JERRY M
Address: 840 SANTA ROSA BLVD.
City-St-Zip: FORT WALTON BEACH, FL 32548 US

Title: SEC.
Name: STOVER, CRISTA
Address: 2236 PRYTANIA CIR.
City-St-Zip: NAVARRE, FL 32566 US

Title: TREA
Name: BRANCHCOMB, LISA
Address: 159 BENTARROW DR.
City-St-Zip: DESTIN, FL 32541 US

Title: VICE
Name: RICK, RICKETTS M III
Address: 3581 WAVERLY WAY
City-St-Zip: DESTIN, FL 32541 US

Title: DIRE
Name: EDWARDS, DEBORAH L
Address: 41 BAY DR. NE
City-St-Zip: FORT WALTON BEACH, FL 32548 US

Title: DIRE
Name: REDDEN, GARY
Address: 6 OKEECHOBEE CT.
City-St-Zip: DESTIN, FL 32541 US

I hereby 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 all other like empowered.

SIGNATURE: AMANDA WILKERSON

DIRE

02/15/2011

Electronic Signature of Signing Officer or Director

Date