

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005482

FILED
Apr 21, 2009
Secretary of State

Entity Name: EMERALD COAST COMPUTER SOCIETY, INC.

Current Principal Place of Business:

PO BOX 504
FORT WALTON BEACH, FL 32549

New Principal Place of Business:

711 E SUNSET BLVD
FORT WALTON BEACH, FL 32547 US

Current Mailing Address:

PO BOX 504
FORT WALTON BEACH, FL 32549

New Mailing Address:

FEI Number: 59-3444799 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VOSMERA, LOIS
9509 SWEETGUM LANE
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: EDWARD, LENDY
Address: 11 POPLAR AVE
City-St-Zip: SHALIMAR, FL 32579

Title: V () Delete
Name: SZEMERE, FRANK
Address: 711 E SUNSET BLVD
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: T () Delete
Name: VOSMERA, LOIS
Address: 9509 SWEETGUM LANE
City-St-Zip: NAVARRE, FL 32566

Title: S () Delete
Name: CRAMER, BERNICE
Address: 673 TERRELS AVENUE
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SZEMERE, FRANK
Address: 711 E SUNSET BLVD
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: V (X) Change () Addition
Name: FERRIS, WARREN
Address: 112 FERRY RD
City-St-Zip: FORT WALTON BEACH, FL 32548

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

Title: S (X) Change () Addition
Name: CRAMER, BERNICE
Address: 673 JERRELS AVENUE
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: 2VP () Change (X) Addition
Name: SETTERBERG, DONALD
Address: 11 RUE DELEROI
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: LOIS VOSMERA

T

04/21/2009

Electronic Signature of Signing Officer or Director

Date