

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004227

FILED
Jan 27, 2009
Secretary of State

Entity Name: EMERALD BEACH CHURCH OF CHRIST OF PANAMA CITY BEACH, FLORIDA, INC.

Current Principal Place of Business:

301 SOUTH ALF COLEMAN ROAD
PANAMA CITY BEACH, FL 32407

New Principal Place of Business:

Current Mailing Address:

301 SOUTH AIF COLEMAN ROAD
PANAMA CITY BEACH, FL 32407

New Mailing Address:

FEI Number: 59-3581521

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NAVE, LARRY
280 SOMERSET BRIDGE ROAD
SANTA ROSA BEACH, FL 32459 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: PD () Delete
Name: NAVE, LARRY
Address: 280 SOMERSET BRIDGE ROAD
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: VD () Delete
Name: RIGGS, MARC
Address: 22212 INLET BEACH DRIVE
City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: STD () Delete
Name: TURNER, RALPH
Address: 22519 FRONT BEACH ROAD
City-St-Zip: PANAMA CITY BEACH, FL 32413

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VD (X) Change () Addition
Name: CHISOLM, DAVID
Address: 306 MALAGA PLACE
City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: STD (X) Change () Addition
Name: SNOW, BILL
Address: 3623 LEE STREET
City-St-Zip: PANAMA CITY BEACH, FL 32408

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: LARRY NAVE

PD

01/27/2009

Electronic Signature of Signing Officer or Director

Date