

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000007373

FILED
Apr 26, 2005
Secretary of State

Entity Name: FRIENDS OF EMERALD COAST STATE PARKS, INC.

Current Principal Place of Business:

208 CALHOUN AVE
DESTIN, FL 32541

New Principal Place of Business:

Current Mailing Address:

208 CALHOUN AVE
DESTIN, FL 32541

New Mailing Address:

FEI Number: 59-3633574

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KNELLER, SUSAN
208 CALHOUN AVE
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: TD () Delete
Name: HOFER, JOHN
Address: 875 KELL-AIRE DRIVE
City-St-Zip: DESTIN, FL 32541

Title: D () Delete
Name: HOFER, PAULA
Address: 875 KELL-AIRE DRIVE
City-St-Zip: DESTIN, FL 32541

Title: D () Delete
Name: STILES, DONNA
Address: 316 HOLLY
City-St-Zip: DESTIN, FL 32541

Title: D () Delete
Name: MCLARY, READ
Address: 3871 INDIAN TRAIL
City-St-Zip: DESTIN, FL 32541

Title: PD () Delete
Name: RHODES, HAROLD A
Address: 8833 ST ANDREWS DR
City-St-Zip: DESTIN, FL 32541

Title: D () Delete
Name: KNELLER, SUSAN
Address: 308 COLKOVN AVE
City-St-Zip: DESTIN, FL 32541

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: KNELLER, SUSAN
Address: 208 CALHOUN AVE
City-St-Zip: DESTIN, FL 32541

Title: D (X) Change () Addition
Name: ROBIN, STILES
Address: 10 MARINA COVE DR
City-St-Zip: NICEVILLE, FL 32578

Title: D (X) Change () Addition
Name: LOWDER, HELEN
Address: 157 RAINTREE BLVD.
City-St-Zip: NICEVILLE, FL 32578

Title: D (X) Change () Addition
Name: JOHN, HOFER
Address: P. O. BOX 4707
City-St-Zip: FT WALTON BEACH, FL 32549

Title: D (X) Change () Addition
Name: WILLIAMS, JIM
Address: 300 SANPPER DR.
City-St-Zip: DESTIN, FL 32541

Title: D (X) Change () Addition
Name: MURPHY, GEORGE
Address: 1173 N. BAYSHORE DR.
City-St-Zip: VALPARAISO, FL 32580

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SUSAN KNELLER

PD

04/26/2005

Electronic Signature of Signing Officer or Director

Date