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2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2005 8:00 am
Secretary of State
04-20-2005 90342 024 ***150.00

DOCUMENT # P01000101594

1. Entity Name
EMERALD COAST VENTURES, INC

50040307

Principal Place of Business	Mailing Address
2345 MARTIN LUTHER KIND DR PANAMA CITY, FL 32405	PO BOX 13425 TALLAHASSEE, FL 32317

DO NOT WRITE IN THIS SPACE

04142005 No Chg-P CR2E034 (10/03)

4. FEI Number
03-0378085
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DUTTON, JAMES G JR
2345 MARTIN LUTHER KIND DR
PANAMA CITY, FL 32405

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when changing)

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	VP PRESIDENT
NAME	DUTTON, JAMES
STREET ADDRESS	2345 HWY 77
CITY ST ZIP	PANAMA CITY, FL
TITLE	TR
NAME	HEBERT, ROBERT
STREET ADDRESS	PO BOX 1007
CITY-ST-ZIP	KENANSVILLE, NC 28349
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify 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 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. ☐

SIGNATURE: Robert Hebert, Tre 4/14/05
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL Date