2008 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P01000109081

1. Entity Name

EMCO CONSULTING, INC.



FILED Mar 14, 2008 08:00 A Secretary of State

Principal Place of Business

305 S. NEW WARRINGTON PENSACOLA, FL 32507 Mailing Address

PO BOX 4627

PENSACOLA, FL 32507



01112008

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-3758590

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BLANTON, LEANNE T 5105 GRUMANN DRIVE PENSACOLA, FL 32507

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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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) OATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution.			9 🗆	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIRECTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTDC BLANTON, LEANNE T 5105 GRUMANN DRIVE PENSACOLA, FL 32507		U00000858715		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/S BLANTON, MARC K 5105 GRUMANN DRIVE PENSACOLA, FL 32507				04/01/08-80057-009 158.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP	,			DO	NOT WRITE
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TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP				ŧ	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

3-1/-08 (330)43 /-033