

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000030509

FILED
Mar 13, 2007
Secretary of State

Entity Name: EMERALD COAST CONSTRUCTION, INC.

Current Principal Place of Business:

6735 HWY 99
MOLINO, FL 32577

New Principal Place of Business:

Current Mailing Address:

6735 HWY 99
MOLINO, FL 32577

New Mailing Address:

FEI Number: 65-1178706

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOGAN, JOHN D
6735 HWY 99
MOLINO, FL 32577 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: JOGAN, JOHN DAVID
Address: 6735 HWY 99
City-St-Zip: MOLINO, FL 32577

Title: VP () Delete
Name: MANNING, ROBERT TYLER
Address: 6735 HWY 99
City-St-Zip: MOLINO, FL 32577

Title: AVP () Delete
Name: FOX, AARON MICHAEL
Address: 6735 HWY 99
City-St-Zip: MOLINO, FL 32577

Title: ST () Delete
Name: JOGAN, JOHN DAVID
Address: 6735 HWY 99
City-St-Zip: MOLINO, FL 32577

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN JOGAN

PD

03/13/2007

Electronic Signature of Signing Officer or Director

_____ Date