2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000030509

Entity Name: EMERALD COAST CONSTRUCTION, INC.

FILED Jul 27, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6735 HWY 99 1187 HEATHROW DR MOLINO, FL 32577 CANTONMENT, FL 32533

Current Mailing Address: New Mailing Address:

6735 HWY 99 1187 HEATHROW DR MOLINO, FL 32577 CANTONMENT, FL 32533

FEI Number: 65-1178706 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

JOGAN, JOHN D
6735 HWY 99
MOLINO, FL 32577 US
JOGAN, JOHN D
1187 HEATHROW DR
CANTONMENT, FL 32533 US

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: 07/27/2008

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition JOGAN, JOHN DAVID JOGAN, JOHN DAVID Name: Name: 6735 HWY 99 1187 HEATHROW DR Address: Address: City-St-Zip: MOLINO, FL 32577 City-St-Zip: CANTONMENT, FL 32533

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 MANNING, ROBERT TYLER
 Name:
 MEHALOPOULOS, CHRISTOPHER

 Address:
 6735 HWY 99
 Address:
 128 TRANQUILITY DR

 City-St-Zip:
 MOLINO, FL 32577
 City-St-Zip:
 CRESTVIEW, FL 32536

Title: AVP () Delete Title: AVP (X) Change () Addition

 Name:
 FOX, AARON MICHAEL
 Name:
 FOX, AARON MICHAEL

 Address:
 6735 HWY 99
 Address:
 2964 E. OLIVE RD

 City-St-Zip:
 MOLINO, FL 32577
 City-St-Zip:
 PENSACOLA, FL 32514

Title: ST () Delete Title: ST (X) Change () Addition

Name:JOGAN, JOHN DAVIDName:JOGAN, JOHN DAVIDAddress:6735 HWY 99Address:1187 HEATHROW DRCity-St-Zip:MOLINO, FL 32577City-St-Zip:CANTONMENT, FL 32533

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN DAVID JOGAN PD 07/27/2008