

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000040866

FILED
Jan 13, 2004
Secretary of State

Entity Name: EMERALD COAST SERVICES & ASSOCIATES INC.

Current Principal Place of Business:

2701 CRAWFORDVILLE HWY #OFFICE 226
CRAWFORDVILLE, FL 32327

New Principal Place of Business:

Current Mailing Address:

2701 CRAWFORDVILLE HWY #OFFICE 226
CRAWFORDVILLE, FL 32327

New Mailing Address:

FEI Number: 80-0065811

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOON, JAMES W
2701 CRAWFORDVILLE HWY #OFFICE 226
CRAWFORDVILLE, FL 32327

Name and Address of New Registered Agent:

SMITH, CHARLES S
2701 CRAWFORDVILLE HWY #OFFICE 226
CRAWFORDVILLE, FL 32327

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: CHARLES S SMITH

01/13/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SMITH, CHARLES S
Address: 2701 CRAWFORDVILLE HWY #OFFICE 226
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: V (X) Delete
Name: MOON, JAMES W
Address: 2701 CRAWFORDVILLE HWY #OFFICE 226
City-St-Zip: CRAWFORDVILLE, FL 32327

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

SIGNATURE: CHARLES S SMITH

P

01/13/2004

Electronic Signature of Signing Officer or Director

Date