2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000041010

1. Entity Name

EMERALD BEACH RESORT OF NW FLA, INC.



Principal Place of Business

505 MOONEY ROAD FORT WALTON BEACH, FL 32547 Mailing Address

505 MOONEY ROAD

FORT WALTON BEACH, FL 32547

FILED Apr 30, 2007 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

4. FEI Number Applied For 65-1186037 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

CR2E034 (11/05)

BARRON, DAVID 505 MOONEY ROAD FORT WALTON BEACH, FL 32547

DO NOT WRITE IN THIS SPACE

No Chg-P

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 renatating) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		Election Campaign Finance Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BARRON, DAVID 505 MOONEY ROAD FORT WALTON BEACH, FL 32547				
NAME STREET ADDRESS CITY-ST-ZIP					U00000748905 05/18/07-80001-014 150.00
TITLE NAME STREET ADDRESS CITY - ST-ZIP			!	DO	NOT WRITE
NAME STREET ADDRESS CITY - ST - ZIP				in ⁻	THIS SPACE
TITLE NAME STREET ADDRESS CITY-S1-ZIP					
TITLE NAME STREET ADDRESS					

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR