## **2008 FOR PROFIT CORPORATION** ANNUAL REPORT

## **DOCUMENT # P03000109254**

EMERALD COAST TILE & MARBLE, INC.



**FILED** Apr 07, 2008 08:00 A Secretary of State

Principal Place of Business

5515 HIGHWAY 2297

PANAMA CITY, FL 32404

Mailing Address

5515 HIGHWAY 2297

PANAMA CITY, FL 32404 US



## DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

04042008 No Chg-P

CR2E034 (11/05)

4. FEI Number 42-1608011

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

BOOTH, MICHELLE R 5515 HIGHWAY 2297 PANAMA CITY, FL 32404				NOT WRITE THIS SPACE
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			ered Agent signature required when reinstaling)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00  9. Election Campaign Finar Trust Fund Contribution.			V00000882443	
10.	OFFICERS AND DIREC	TORS		04/16/08-80041-018 150.00
TITLE NAME STREET ADDRESS CITY- ST-ZIP	PVS FLETCHER, GARON M 5515 HIGHWAY 2297 PANAMA CITY, FL 32404			
NAME STREET ADDRESS CITY-ST-ZIP	T BOOTH, MICHELLE R 5515 HIGHWAY 2297 PANAMA CITY, FL 32404			
TITLE NAME STREET ADDRESS CITY - ST- ZIP			DO	NOT WRITE
THUE NAME STREET ADDRESS CITY-ST-ZIP			and the second of the second o	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	,			

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes 1 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:

TITLE NAME STREET ADDRESS CITY-ST-ZIP

> Donon m Letter

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR