

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000059404

FILED
May 18, 2005
Secretary of State

Entity Name: EMERALD COAST HOME SOLUTIONS, INC.

Current Principal Place of Business:

328 DAVENPORT ROAD
FORT WALTON BEACH, FL 32547

New Principal Place of Business:

120 CABANA WAY
CRESTVIEW, FL 32536

Current Mailing Address:

328 DAVENPORT ROAD
FORT WALTON BEACH, FL 32547 US

New Mailing Address:

120 CABANA WAY
CRESTVIEW, FL 32536 US

FEI Number: 74-3118841

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOWD, JOHN R JR.
285 HIGHWAY 98 EAST
SUITE A-2
DESTIN, FL 32541 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

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:

Title: P () Delete
Name: LEWIS, DAVID
Address: 328 DAVENPORT ROAD
City-St-Zip: FORT WALTON BEACH, FL 32547 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LEWIS, DAVID
Address: 120 CABANA WAY
City-St-Zip: CRESTVIEW, FL 32536 US

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: DAVID LEWIS

PRES

05/18/2005

Electronic Signature of Signing Officer or Director

Date