2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000112484

Address:

City-St-Zip:

Entity Name: EMERALD COAST LAND & DWELLINGS INC

FILED Apr 28, 2005 Secretary of State

| Littly Nai | IIIC. LIVILKAL | D COAST LAIND & DVVELLING | 55, INC. | | | | |
|---|---|----------------------------------|---|--|----------------------------------|--------------|--|
| Current Principal Place of Business: | | | New Princ | New Principal Place of Business: | | | |
| | RY STREET DLA, FL 32507 | | | | | | |
| Current Mailing Address: | | | New Maili | New Mailing Address: | | | |
| | RY STREET DLA, FL 32507 | | | | | | |
| FEI Number: | : 20-2265260 | FEI Number Applied For() | FEI Number Not Appl | icable () | Certificate of Status Des | sired () | |
| Name and | Address of C | Current Registered Agent: | Name and | Address of | New Registered Agen | t: | |
| 418 CREA | RS, MARY ELL RY STREET DLA, FL FL | EN B US | | | | | |
| | named entity : e of Florida. | submits this statement for the p | ourpose of changing i | ts registered | office or registered age | nt, or both, | |
| SIGNATUR | RE: | | | | | | |
| | Electror | nic Signature of Registered Age | ent | | Date | | |
| Election Car | npaign Financin | g Trust Fund Contribution (). | | | | | |
| OFFICERS AND DIRECTORS: | | | ADDITION | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | | | |
| Title: Name: Address: City-St-Zip: | P () CHARTERS, M 418 CREARY S PENSACOLA, F | STREET | Title: Name: Address: City-St-Zip: | (| () Change () Addition | | |
| Title: Name: Address: City-St-Zip: | VP () STEADHAM, JO 4401 LA JOLLA PENSACOLA, F | A. | Title: Name: Address: City-St-Zip: | S/T (STEADHAM, 4401 LA JOL PENSACOLA | LA | | |
| Title: Name: Address: City-St-Zip: | |) Delete | Title: Name: Address: City-St-Zip: | MITCHELL, V | | | |
| Title: Name: | |) Delete | Title: Name: | VP (WRIGHT, JAN | () Change (X) Addition MES W | | |

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.

Address:

City-St-Zip:

4401 LA JOLLA

PENSACOLA, FL 32504

SIGNATURE: MARY ELLEN CHARTERS P 04/28/2005