

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000112571

**FILED**  
**Jan 07, 2008**  
**Secretary of State**

**Entity Name:** EMERALD COAST ROOFING, INC.

**Current Principal Place of Business:**

166 HARBOR TRACE  
FREEPORT, FL 32439 US

**New Principal Place of Business:**

102 S JOHN SIMS PKWY  
VALPARAISO, FL 32580 US

**Current Mailing Address:**

166 HARBOR TRACE  
FREEPORT, FL 32439 US

**New Mailing Address:**

**FEI Number:** 20-5466527      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MASSEY, LAURA  
166 HARBOR TRACE  
FREEPORT, FL 32439 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** P/D ( ) Delete  
**Name:** MASSEY, LAURA  
**Address:** 166 HARBOR TRACE  
**City-St-Zip:** FREEPORT, FL 32439 US

**Title:** VP/D ( ) Delete  
**Name:** BROWN, WILLIAM  
**Address:** 1244 WHITEWOOD WAY  
**City-St-Zip:** NICEVILLE, FL 32578 US

**Title:** SEC (X) Delete  
**Name:** MILLER, MICHAEL R  
**Address:** 105 INDIAN WOMAN RD  
**City-St-Zip:** SANTA ROSA BEACH, FL 32459 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

**Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:**

**Title:** VP/D (X) Change ( ) Addition  
**Name:** MILLER, MICHAEL R  
**Address:** 105 INDIAN WOMAN RD  
**City-St-Zip:** SANTA ROSA BEACH, FL 32459 US

**Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:**

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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:** LAURA MASSEY

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

PRES

01/07/2008

\_\_\_\_\_  
Date