2001 UNIFORM BUSINESS REPORT (UBR)

May 04, 2001 8:00 am Secretary of State DOCUMENT # **P96000039475** 1. Entity Name THE EMERALD COAST BREWING COMPANY 05-04-2001 90008 039 ***150.00 Principal Place of Business Mailing Address 3981 NORTH W STREET 3981 NORTH W STREET UNIT 39 UNIT 39 PENSACOLA FL 32505 PENSACOLA FL 32505 ШS LIS 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-3378865 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent 6194011 BECK, GREGORY A Number's Not Acceptable) 3882 OLYMPIC LANE JACKSONVILLE FL 32223 City 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. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. **C**hange ☐ Addition PTD ☐ Delete TITLE TITLE BECK, GREGORY A NAME Reck, Gregory 8008 Malibu NAME STREET ADDRESS 3882 OLYMPIC LANE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE FL 32223 ☐ Delete Change Addition TITLE JOHNSON, CECIL C NAME NAME STREET ADDRESS 4917 ALVIN DR. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PENSACOLA FL 32507 Change ☐ Addition SD TITLE ☐ Delete TITLE Beck, Devise L. 8008 malibu Circle Beck, Dênise l` ÑAME NAME STREET ADDRESS STREET ADDRESS 3882 OLYMPIC LANE CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE FL 32223 Pensacola, PC 32514 Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Change ☐ Addition ☐ Detete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

FILED

SIGNATURE: A. B. Gregory A. Beck 4-27-01 850-469-1122

SIGNATURE AND TYPED OF AGINTED NAME OF SIGNING OFFICER OR DIRECTOR TO DESCRIPTION OF DESCRIPTION OF DIRECTOR TO DESCRIPTION OF DIRECTOR TO DESCRIPTION OF DESCRIPTIO

changed, or on an attachment with an address, with all other like empowered

I hereby certify that the information supplied with this filing does not qualify 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 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 11 or Block 12 if