

2004 FOR PROFIT CORPORATION  
ANNUAL REPORT

**FILED**  
**Jun 14, 2004 08:00 AM**  
**Secretary of State**

DOCUMENT # P97000058312

1. Entity Name  
EMERALD COAST PROFESSIONAL SITTING SERVICE,  
INC.



Principal Place of Business  
6456 STARFISH COVE  
GULF BREEZE, FL 32563

Mailing Address  
P.O. BOX 5446  
NAVARRE, FL 32566

**DO NOT WRITE IN THIS SPACE**

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05052004 No Chg-P CR2E034 (10/03)

4. FEI Number  
59-3458923

Applied For  
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

COLLINS, SANDY  
6456 STARFISH COVE  
GULF BREEZE, FL 32563

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IN 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 Sandy Collins, Owner/Agent June 11, 2004  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$550.00  
Due by September 8, 2004

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	O
NAME	COLLINS, SANDY
STREET ADDRESS	6456 STARFISH COVE.
CITY-ST-ZIP	GULF BREEZE, FL 32563
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
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NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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06/14/04-80001-014 558.75

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IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE Sandy Collins SANDY COLLINS JUNE 11, 2004  
Signature and typed or printed name of signing officer or director Date  
(858) 736-8964