

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 22, 2002 8:00 am
Secretary of State

05-22-2002 90188 044 ***150.00

DOCUMENT # P98000020014

1. Entity Name

EMERALD LADIES' JOURNAL, INC.

Principal Place of Business

9800 EMMA WAY
 NAUJARRE FL 32566

Mailing Address

10859 EMERALD COAST PKWY
 #4-171
 DESTIN FL 32550
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3496246

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HAUGHT, ALEXANDRA R
 66 INDIGO LOOP
 DESTIN FL 32541

Name

ALEXANDRA BROWN

Street Address (P.O. Box Number is Not Acceptable)

66 INDIGO LOOP

City

DESTIN, FL

FL

Zip Code

32541

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

Alexandra Brown

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/30/02
 DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☒

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☒ Delete
 NAME DOWDLE, E. CAREY
 STREET ADDRESS 343 L'ATRIUM CIRCLE
 CITY-ST-ZIP DESTIN FL 32541

TITLE D - PRESIDENT ☐ Change ☒ Addition
 NAME TROSPER, JULIE, A.
 STREET ADDRESS 9800 EMMA WAY
 CITY-ST-ZIP NAVARRE, FL 32566

TITLE D ☒ Delete
 NAME EMERY, DEBORAH C
 STREET ADDRESS 29 GARDEN BAY COURT
 CITY-ST-ZIP DESTIN FL 32541

TITLE D - VICE PRESIDENT ☐ Change ☒ Addition
 NAME Wm. DEAN TROSPER
 STREET ADDRESS 9800 EMMA WAY
 CITY-ST-ZIP NAVARRE, FL 32566

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
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 STREET ADDRESS
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TITLE ☐ Change ☐ Addition
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TITLE ☐ Delete
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 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

SIGNATURE:

Julie Trosp

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-30-02

Date

(850) 217-0764

Daytime Phone #

CR2E034 (9/01)