

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
 AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

011498

PROFIT CORPORATION
 ANNUAL REPORT
 1999



FLORIDA DEPARTMENT OF STATE
 Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

99 SEP 27 AM 10:05

DOCUMENT # P98000052946

1. Corporation Name
 EMERALD COAST EXTERIORS INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business
 246 SHARON COURT
 MARY ESTHER FL 32569

Mailing Address
 246 SHARON COURT
 MARY ESTHER FL 32569

3. Date Incorporated or Qualified

06/10/1998

2. Principal Place of Business

2a. Mailing Address

4. FEI Number

59-3517-230

Applied For

Not Applicable

21. Suite, Apt. #, etc.

26. Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional Fee Required

22. City & State

27. City & State

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

23. Zip

Country

28. Zip

Country

8. This corporation owes the current year Intangible Personal Property.

Yes No

24. Zip

Country

29. Zip

Country

9. Name and Address of Current Registered Agent

DRAKE, PATRICIA H
 246 SHARON COURT
 MARY ESTHER FL 32569

10. Name and Address of New Registered Agent

81. Name

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

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12. TITLE DELETE

NAME: PD RILEE, BRIAN K
 STREET ADDRESS: 246 SHARON COURT
 CITY-ST-ZIP: MARY ESTHER FL 32569

13. 1.1 TITLE Change Addition

TITLE: STD DELETE

NAME: DRAKE, PATRICIA H
 STREET ADDRESS: 246 SHARON COURT
 CITY-ST-ZIP: MARY ESTHER FL 32569

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

400003006474-1
 -10/05/99-01117-007
 ***150.00 ***150.00

9/29/99

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9-22-99

950-450-7411

CR2E034 (5/99)

EMERALD COAST EXTERIORS INC.

JULY 28, 1999

PLEASE CHANGE OUR ADDRESS IN YOUR RECORDS. WE DID NOT RECEIVE A NOTICE CONCERNING THE RENEWAL OF THE CORPORATION UNTIL RECENTLY. I FEEL THE CHANGE OF ADDRESS DID NOT GO THROUGH PROPERLY.

ENCLOSED IS A CHECK FOR \$ 150.00 PLEASE ALLOW THE CORPORATION TO RENEW FOR THIS IN THAT WE HAD NO NOTICE OF RENEWAL BEFORE NOW.

Thank you
Patti Drabe

New Address:

684 Emerald Bay Dr
DESTIN, FL 32541