

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000080937

FILED
Apr 24, 2008
Secretary of State

Entity Name: EMERALD COAST MANAGEMENT GROUP, INC.

Current Principal Place of Business:

3035 WESTFIELD ROAD
3
GULF BREEZE, FL 32563

New Principal Place of Business:

Current Mailing Address:

PO BOX 1473
GULF BREEZE, FL 32561

New Mailing Address:

PO BOX 1473
GULF BREEZE, FL 32562

FEI Number: 59-3535480

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCRIBNER, GEORGE R
3219 FERNWOOD DRIVE
GULF BREEZE, FL 32563 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: D () Delete
Name: GUNTER, LARRY T
Address: 3632 TIGER POINT BLVD.
City-St-Zip: GULF BREEZE, FL 32563

Title: D () Delete
Name: SCRIBNER, GEORGE R
Address: 3219 FERNWOOD DRIVE
City-St-Zip: GULF BREEZE, FL 32563

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: LARRY T GUNTER

PRES

04/24/2008

Electronic Signature of Signing Officer or Director

Date