

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 19, 2004 8:00 am
Secretary of State

03-19-2004 90043 017 ***150.00

DOCUMENT # P99000092303

1. Entity Name

EMERALD COAST BINGO, INC.



Principal Place of Business

7924 FRONT BEACH ROAD
PANAMA CITY BEACH FL 32408

Mailing Address

7924 FRONT BEACH ROAD
PANAMA CITY BEACH FL 32408

54019834



MOORE CR2E034 (11/03)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3605545

Applied For

Not Applicable

Zip

Country

Zip

Country

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

BENNETT, DERRICK ESQ.
112 EAST THIRD COURT
PANAMA CITY FL 32401

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004. Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE V ☐ Delete
NAME BUCKLAND, KENNETH J
STREET ADDRESS 2629 COUNTRY ROAD 2321
CITY-ST-ZIP SOUTHPORT FL 32409

TITLE VP ☒ Change ☐ Addition
NAME BUCKLAND, Kenneth J.
STREET ADDRESS 1633 Hope Cir.
CITY-ST-ZIP PANAMA CITY Beach, FL 32407

TITLE P ☐ Delete
NAME BUCLAND, SANDRA J
STREET ADDRESS 103 SUMMER BREEZE ROAD
CITY-ST-ZIP PANAMA CITY BEACH FL 32413

TITLE P ☒ Change ☐ Addition
NAME BUCKLAND, SANDRA J
STREET ADDRESS 103 SUMMER BREEZE Rd
CITY-ST-ZIP PANAMA CITY BEACH, FL 32413

TITLE S ☐ Delete
NAME WORLEY, JACKIE
STREET ADDRESS 101 SUMMER BREEZE RD
CITY-ST-ZIP PANAMA CITY BEACH FL 32413

TITLE T ☒ Change ☐ Addition
NAME ~~Worley~~ WORLEY, JACKIE
STREET ADDRESS P.O. BOX 18678
CITY-ST-ZIP PANAMA CITY Beach, FL 32417

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/17/04

850

235-9060