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Mar 11, 1999 8:00 am Secretary of State

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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **S69033**

| EMERALI | D COAST MANAGEMENT, | INC. | | | | | |
|---|---|---|----------------------------|----------------|---|---|----------------|
| Principal Place | of Business | Mailing Address | | | 1 126 116 to the purish 18111 E press 1119 E titr 65 att 410 | 31 419 14 8 1841 8 1 | E11 0:011 1001 |
| 4129 DANNY DRIVE PANAMA CITY FL 32408 US 4129 DANNY DRIVE PANAMA CITY FL 32408 US | | | | | DO NOT WRITE IN THIS S | SPACE | |
| | | | | | 3. Date Incorporated or Qualifed | | |
| | | 2a. Mailing Address | | | 07/17/1991 4. FEI Number | Δnr | olied For |
| | | | | | 59-3080579 | | Applicable |
| Suite, Apt. 1 | # atc | Suite, Apt. #, etc. | | | | \$8.75 A | |
| 22 | , c.c. | 27 | | | 5. Certificate of Status Desired | Fee Red | |
| City & State City & State | | | | | 6. Election Campaign Financing | \$5.00 | May Be |
| 23 | | 28 | 28 | | Trust Fund Contribution | Added to | Fees |
| Zip | Country | Zip | Country | | 8. This corporation owes the current year Inta | | _ |
| 24 | 25 | | 30 | | Totalian reporty rax. | | □No |
| | 9. Name and Address of Currer | t Registered Agent | | | 10. Name and Address of New Registered A | gent | |
| DEAL | ע ואכור די | | 81 | Name | | | |
| PEAVY, JACK D 4129 DANNY DRIVE | | | 82 | Street | Address (P.O. Box Number is Not Acceptable) | | |
| PANAMA CITY BEACH FL 32408 | | | 83 | | | | |
| 1 017 | TWA CITT DEACTITE SETO | | 03 | | | | |
| | | | 84 | City | FL | 85 Zip C | ode |
| office or re agent. I ar SIGNATURE | egistered agent, or both, in the State in familiar with, and accept the obligations. | of Florida. Such change was aut tions of, Section 607.0505, Florid | thorized by da Statutes | tne corpo | corporation submits this statement for the purpose of coration's board of directors. I hereby accept the appoin | ment as reg | jistered |
| 12. | | D DIRECTORS | 13. | it signetare t | ADDITIONS/CHANGES TO OFFICERS AND | DIRECTO | RS IN 12 |
| TITLE | PVD | ☐ DELETE | 1.1 TITLE | | | ☐ Change | ☐ Addition |
| NAME | PEAVY, JACK D | | 1.2 NAME | | | | |
| STREET ADDRESS | 4129 DANNY DRIVE | | 1.3 STREE | T ADDRESS | | | |
| CITY-ST-ZIP | PANAMA CITY FL 32408 | | 1.4 CITY-S | T-ZIP | | | |
| TITLE | | ☐ DELETE | 2.1 TITLE | | | Change | Addition |
| NAME | | | 2.2 NAME | , ! | | | 1 |
| STREET ADDRESS | | | 2.3 STREE | T ADDRESS | y y waspers with | - | |
| CITY-ST-ZIP | | · | 2. 4 CITY-5 | ST-ZIP | | | |
| TITLE | | ☐ DELETE | 3.1 TITLE | | | ☐ Change | Addition |
| NAME | | | 3.2 NAME | | | | |
| STREET ADDRESS | | | . 3.3 STREE | TADDRESS | | | |
| CITY-ST-ZIP | | | 3 4. CITY- 5 | ST-ZIP | | Change | Addition |
| TITLE | | ☐ DELETE | 4.1 TITLE | | | ☐ Ollaride | Addibon |
| NAME | | | 4. 2 NAME | | | | |
| STREET ADDRESS | | | | T ADDRESS | | | |
| CITY-ST-ZIP | | ☐ DELETE | 4.4 CITY-S 5.1 TITLE | T-ZIP | | Change | Addition |
| TITLE | | C Decrie | 5.1 NAME | | | | _ |
| NAME empert anopeee | | | | TADDRESS | | | ļ |
| STREET ADDRESS CITY-ST-ZIP | | | 5.4 CITY-S | | | | |
| TITLE | | ☐ DELETE | 6.1 TITLE | | | Change | Addition |
| NAME | | — *** * | 6.2 NAME | | | - | |
| STREET ADDRESS | | | 6.3 STREE | T ADDRESS | , | | |
| CITY-ST-ZIP | | | 6.4 CITY-S | T-ZIP | | | |

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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR