

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002253

FILED
Jan 12, 2015
Secretary of State
CC3235561376

Entity Name: EMERALD ISLE RESORT CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

22 VIA DE LUNA
PENSACOLA BEACH, FL 32561

Current Mailing Address:

22 VIA DE LUNA
PENSACOLA BEACH, FL 32561

FEI Number: 65-0747941

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BLANKERSHIP, SUZANNE
139 EAST GOVERNMENT STREET
PENSACOLA, FL 32502 US

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

Officer/Director Detail :

Title PRESIDENT
Name WILSON, SAM
Address 412 N SUNSET DR
City-State-Zip: GULF BREEZE FL 32561

Title S
Name STEVENS, GREG
Address 473 VININGS ESTATES DR
City-State-Zip: MABLETON GA 30126

Title DIRECTOR
Name LOVELL, ERIC
Address 6801 SPANISH TRIAL
City-State-Zip: PENSACOLA FL 32504

Title TREASURER
Name GALL, THOMAS
Address 2470 FLAT STONE DR
City-State-Zip: CUMMING GA 30041

Title VP
Name SMITH, KEN
Address 915 COLONIAL REA CT
City-State-Zip: CHARLOTTE NC 28226

Title DIRECTOR
Name HARPER, NAN
Address 22 VIA DELUNA DR.
 SUITE 901
City-State-Zip: PENSACOLA BEACH FL 32561

Title DIRECTOR
Name BASTION, SCOTT
Address 2117 VETERANS BLVD
City-State-Zip: METAIRIE LA 70002

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SAM WILSON

PRESIDENT

01/12/2015

Electronic Signature of Signing Officer/Director Detail

Date