## 2000 UNIFORM BUSINESS REPORT (UBR)

## Feb 16, 2000 8:00 am Secretary of State **DOCUMENT # 711216** 1. Entity Name 02-16-2000 90133 038 \*\*\*\*61.25 DESTIN CHAMBER OF COMMERCE, INC. Mailing Address Principal Place of Business 1021 HWY. 98. EAST 1021 HWY. 98. EAST -711010 PO BOX 8 PO BOX 8 **DESTIN FLA 32541-2908** DESTIN FL 32541 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4, FEI Number City & State 59-1145150 Not Application \$8.75 Additional Zip Country 5. Certificate of Status Desired П Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) RAYMOND C. NAVITSKY 1021 HWY. 98, EAST P.O. BOX 8 Zip Code City **DESTIN FL 32540** 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. SIGNATURE DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable Make Check Payable to 9. Election Campaign Financing \$5.00 May Be FILE NOW: Trust Fund Contribution. Added to Fees Department of State **FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. PRESIDENT Delete TITLE TITLE MCGINNIS NAME DALE, PETERSON NAME 1021 HWY 98 EAST 1021 HWY 98 E STREET ADDRESS STREET ADDRESS din 71. 32.540 CITY-ST-7IP CITY-ST-ZIP DESTIN FL ☐ Channe ☐ Delete TITLE TITLE NAME MCGINNIS, SUSAN NAME STREET ADDRESS STREET ADDRESS 1021 HWY. 98, EAST CITY-ST-ZIP CITY-ST-ZIP DESTIN FL ☐ Change ☐ Delete STD TITLE FULMER, TIM NAME STREET ADDRESS STREET ADDRESS 1021 HWY 98 E CITY-ST-ZIP CITY-ST-ZIP DESTIN FL ☐ Change ☐ Delete TITLE TITLE NAME SCOTT, BRAD NAME STREET ADDRESS STREET ADDRESS 1021 HWY. 98, E. CITY-ST-ZIP CITY-ST-ZIP DESTIN FL TITLE ☐ Change ☐ Delete TITLE NAVITSKY, RAYMOND NAME NAME 1021 HWY. 98, E. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DESTIN FL TITLE ☐ Change $\Box$ . ☐ Delete TITLE MCNEIL, JOHN NAME NAME 1021 HWY 98 E. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

**FILED** 

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 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 indicated on this report or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block changed, or on an attachment with an address, with ell other like empowered.

SIGNATURE:

Aymond C. Navitsky 2/1/00 654-65