2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L02000009708

1. Entity Name
DESTIN WEST REALTY, L.L.C.

FILED
05 MAY 25 AM 11:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
1322 MIRACLE STRIP PARKWAY S.E. FT. WALTON BEACH, FL 32548	1322 MIRACLE STRIP PARKWAY S.E. FT. WALTON BEACH, FL 32548

2. Principal Place of Business	3. Mailing Address
1500 Miracle Strip Pkwy SE Suite, Apt. #, etc.	1500 Miracle Strip Pkwy SE Suite, Apt. #, etc.
City & State: Fort Walton Beach	City & State: Fort Walton Beach
Zip: 32548 Country: USA	Zip: 32548 Country: USA

04272005 Chg-LLC CR2E083 (10/03)

4. FEI Number: 04-3652621 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
WALTERS, ELIZABETH J 221 MCKENZIE AVENUE PANAMA CITY, FL 32401	Name: Salvatori & Wood, P.L. Street Address (P.O. Box Number is Not Acceptable): 4001 Tamiami Trl N Ste 330 City: Naples FL Zip Code: 34103

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: _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $50.00
Due by May 1, 2005

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM WALLACE, DAVID 1322 MIRACLE STRIP PARKWAY S.E. FT. WALTON BEACH, FL 32548	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM WALLACE, DAVID 1500 Miracle Strip Pkwy SE Fort Walton Beach FL 32548	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM TOLBERT, FRED E III 1322 MIRACLE STRIP PKWY SE FORT WALTON BEACH, FL 32548	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM Tolbert, FRED E III 1500 Miracle Strip Pkwy SE Fort Walton Beach FL 32548	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	np 5/25	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: _____ 4/28/05 850-243-9161
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #