2004 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

Apr 12, 2004 8:00 am Secretary of State DOCUMENT # P02000097027 1. Entity Name 04-12-2004 90317 017 ***150.00 USP DESTIN, INC. Mailing Address Principal Place of Business 15305 DALLAS PKWY, SUITE 1600 15305 DALLAS PKWY, SUITE 1600 94050084 ADDISON TX 75001 ADDISON TX 75001 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E034 (11/03) Applied For City & State 4. FEI Number City & State 51-0426661 Not Applicable Zip Zip Country \$8.75 Additional 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 CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S PINE ISLAND RD **PLANTATION FL 33324** 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, DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. TITLE ☐ Change ☐ Addition nn e D ☐ Delete STEEN, DONALD E NAME NAME 15305 DALLAS PKWY STE 1600, LB 28 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ADDISON TX 75001 CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete NAME WILCOX, WILLIAM H 15305 DALLAS PARKWAY,. SUITE 1600 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ADDISON TX 75001 CITY-ST-ZIP ☐ Delete TITLE ☐ Change ■ Addition TITLE NAME WELLIK, JOHN J NAME - 2. STREET ADDRESS 15305 DALLAS PARKWAY SUITE 1600 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ADDISON TX 75001 Asst Sec ☐ Change Addition ☐ Delete TITLE TITLE NAME Alex Jenkins NAME 15305 Dallas Pkuy # 1600 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TX 75001 CITY-ST-7IP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TM F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

thereby 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.

Alex Jenkins, Asst See

SIGNATURE:

TED NAME OF SIGNING OFFICER OR DIRECTOR

FILED