

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 23, 2006 08:00 AM
Secretary of State

DOCUMENT # P02000097027

Entity Name
USP DESTIN, INC.



Principal Place of Business
**15305 DALLAS PKWY, SUITE 1600
ADDISON, TX 75001**

Mailing Address
**15305 DALLAS PKWY, SUITE 1600
ADDISON, TX 75001**



01052006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number **51-0426661** Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**IT CORPORATION SYSTEM
200 S PINE ISLAND RD
PLANTATION, FL 33324**

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IN THIS SPACE**

I, 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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

OFFICERS AND DIRECTORS

D
STEEN, DONALD E
15305 DALLAS PKWY STE 1600, LB 28
ADDISON, TX 75001

P
WILCOX, WILLIAM H
15305 DALLAS PARKWAY, SUITE 1600
ADDISON, TX 75001

VS
WELLIK, JOHN J
15305 DALLAS PARKWAY SUITE 1600
ADDISON, TX 75001

AS
JENKINS, ALEX
15305 DALLAS PKWY #1600
ADDISON, TX 75001

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01/30/06-80035-023 150.00

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IN THIS SPACE**

I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Alex Jenkins,
Asst Secretary

Date

Daytime Phone #

1/16/06 972-713-3514