

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Mar 22, 2006 08:00 A
Secretary of State**

DOCUMENT # 706130

1. Entity Name
DESTIN WATER USERS, INC.



Principal Place of Business
**135 BENNING DR
DESTIN, FL 32541 US**

Mailing Address
**P.O. BOX 308
DESTIN, FL 32540-0308 US**



03012006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1082116

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**GRISWOLD, RICHARD
75 BAY HAVEN CT.
DESTIN, FL 32541**

**DO NOT WRITE
IN THIS SPACE**

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

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

1100000477709
04/06/06-80062-003 61.25

10. OFFICERS AND DIRECTORS

TITLE	ST
NAME	DAVID, DONALD W
STREET ADDRESS	4737 PAPAYA PARK
CITY-ST-ZIP	DESTIN, FL 32541
TITLE	V
NAME	WERNET, LOCKWOOD
STREET ADDRESS	931 HWY 98 E
CITY-ST-ZIP	DESTIN, FL 32541
TITLE	D
NAME	LINK, JIM
STREET ADDRESS	15 WEEKEWACHEE CR
CITY-ST-ZIP	DESTIN, FL 32541
TITLE	D
NAME	POHLEN, JEROME J
STREET ADDRESS	13 COUNTRY CLUB DR E
CITY-ST-ZIP	DESTIN, FL 32541
TITLE	D
NAME	CHRISTESEN, RUSSELL
STREET ADDRESS	119 COUNTRY CLUB DR. W.
CITY-ST-ZIP	DESTIN, FL 32541
TITLE	P
NAME	WEIDENHAMER, TOM
STREET ADDRESS	808 WILD OAK AVE
CITY-ST-ZIP	DESTIN, FL 32541

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IN THIS SPACE**

12. 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 617, 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: Thomas Weidenhamer, Pres 03/17/2006 8508373190

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #