

2-28-97 B-2486 C

FILE NOW: FILING FEE IS \$61.25

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Apr 02 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 746750 (9)

1. Corporation Name

DESTIN SNOWBIRDS, INC.

Principal Place of Business

P O BOX 1367
DESTIN FL 32541

Mailing Address

P O BOX 1367
DESTIN FL 32540-13673. Date Incorporated or Qualified
04/16/19793a. Date of Last Report
03/04/1996

2. Principal Place of Business

21 AS ABOVE

Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

2a. Mailing Address

26 AS ABOVE

Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

4. FEI Number

59-2466105

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

YOUNG, CAROL
2080 SANDPIPER COVE
775 GULF SHORE DR.
DESTIN FL 32541

DELETE

81 Name

FRANK TURNER

82 Street Address (P.O. Box Number is Not Acceptable)

600 GULF SHORE DR.

83 ~~769 SUNSET DRIVE~~84 ~~STROUD~~

ONT. CANADIAN FL

85 Zip Code

32541

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 617.0503, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

2/25/97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ST
NAME ROSS-CASSIN, MARY
STREET ADDRESS R.R. 3 14 MCKENZIE ST
CITY-ST-ZIP WARTON, ONTARIO, CANADA NOH-2TD1.1 TITLE FRANK CASSIN, ☐ Change ☒ Addition
1.2 NAME 3RD VICE-PRESIDENT
1.3 STREET ADDRESS R.R. #3, 14 MCKENZIE ST.
1.4 CITY-ST-ZIP WARTON, ONT., CANADA NOH-2TDTITLE VD
NAME TURNER, FRANK
STREET ADDRESS 769 SUNSET DR
CITY-ST-ZIP STROUD ON2.1 TITLE ☐ Change ☒ Addition
2.2 NAME
2.3 STREET ADDRESS 600 GULF SHORE DR.
2.4 CITY-ST-ZIP DESTIN, FLORIDA. 32541TITLE TT
NAME FANCETT, GLENN, TREASURER
STREET ADDRESS RD RYDER RD
CITY-ST-ZIP CLAYVILLE NY 133223.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIPTITLE TP
NAME YOUNG, CAROL
STREET ADDRESS 13 SUNSET DR
CITY-ST-ZIP ST. CLEMENS, ONTARIO, CANADA4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIPTITLE VD
NAME SELID, ADDIE, 1st V.P.
STREET ADDRESS 808 E 1ST ST
CITY-ST-ZIP PARK RAPID MN 564705.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIPTITLE VD
NAME VAN KREVELEN, TOM, 2ND V.P.
STREET ADDRESS 2844 OVERLOOK DR 4100 BURNING TREE
CITY-ST-ZIP BLOOMINGTON IN 47304 DESTIN, FL 32541. DR6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Filed 4/97 837-8095

CR2E037 (9/96)