FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

	1998	7.1	tary of State CORPORATIONS	Secretary of State	
DOCUI 1. Corporatio	MENT # 74675	50 (9)			
DESTI	N SNOWBIRDS, INC.				
Principal Plac	e of Business	Mailing Address		ı tadatı iddət dibin ayılı foddi dilil dalı dalı	II 41611 (1961 6161 6161 6161 6161 6161
P O BOX 1367 P O BOX 1367 DESTIN FL 32541 DESTIN FL 32541				3. Date Incorporated or Qualified	
DESTINITE 323	191	DESTIN FL 32941		04/16/1979 4. FEI Number	I IAnaBad Fac
				59-2466105	Applied For Not Applicable
_	lace of Business	2a. Mailing Address		5. Certificate of Status Desired	\$8.75 Additional
21 Suite, Apt.	#, etc.	Suite, Apt. #, etc.		6. Election Campaign Financing	Fee Required \$5.00 May Be
22		27		Trust Fund Contribution	Added to Fees
City & State City & State 28				7. Is this nonprofit corporation a homeowners association?	
Zip	Country	Zip	Country	8. This corporation owes or has paid the	
24	25 25 O Name and Address of Curr	29	30	Personal Property Tax due June 30. 10. Name and Address of New Register	Yes No
P1 Nome					eo Agent
TURNER, FRANK 82 Street Ad				FRED BUSSA Address (P.O. Box Number is Not Acceptable)	
600 GULFSHORE DR.			63	547 Shore OR	IVE
DESTIN	FL 32541				
City Dest				ectiv F	L 85 Zip Code
11. Pursuant	to the provisions of Sections 617.03	502 and 617.1508, Florida Stat	utes, the above-named	corporation submits this statement for the purpos	e of changing its registered
agent. I a			7 // /2	coration's board of directors. I hereby accept the	dppolitimoni do registered
SIGNATURE	FRED BUS	pent and title if applicable (N	OTE Registered Agent signature	required when reinstating) DAT	12/48
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	ST D	☐ DELETE	1.1 TITLE		Change Addition
NAME STREET ADDRESS	ROŠS-CASSIN, MARY R.R. 3 14 MCKENZIE ST		1.2 NAME 1.3 STREET ADDRESS		
CITY-ST-ZIP	WIARTON, ONTARIO, CANA	ADA NOH2T-0	1.4 CITY+ST-ZIP		
TITLE	VD*T	DELETE	2.1 TITLE	VOT	Change Addition
NAME	TURNER, FRANK		2.2 NAME	EDOD BUSSA	
STREET ADDRESS	600 GULFSHORE DR.		2.3 STREET ADDRESS	547 Shore DRIVE Destin FL	F
CITY-ST-ZIP	DESTIN FL 32541		2. 4 CITY-ST-ZIP	Destin FL	32541
TITLE	EANCETT OF EAN	DELETE	3.1 TITLE	TOF GIX	Change 🔼 Addition
NAME STREET ADDRESS	FANCETT, GLENN RD RYDER RD		3.2 NAME 3.3 STREET ADDRESS	\$ 807 POREST A	UE.
CITY-ST-ZIP	CLAYVILLE NY 13322		3.4. CITY-ST-ZIP	PARK RAPIDS, H	N. 56470
TITLE	VP.O	DELETE	4.1 TITLE	1044 1011 123 13	Change Addition
NAME	CASSIN, FRANK		4. 2 NAME		-
STREET ADDRESS	RR #3, 14 MCKENZIE ST		4.3 STREET ADDRESS		İ
CITY-ST-ZIP	WIARTON, ONT. CANADA N		4.4 CITY - ST - ZIP		
TITLE	VP 7	☐ DELETE	5.1 TITLE	Pto	Change Addition
NAME	SELID, ADDIE		5.2 NAME	SELIO ADDIE	# 7
STREET ADDRESS	808 E 1\$T ST Park rapid MN 56470		5.3 STREET ADDRESS		541
CITY+ST-ZIP TITLE	VP T D	DELETE	5.4 CITY-ST-ZIP 6.1 TITLE	PESTIN FA 35	Change Addition
NAME	VAN KREVELEN, TOM	C. Descrit	6.2 NAME		
STREET ADDRESS	4100 BURNING TREE DRIVE	E	6.3 STREET ADDRESS		
CITY ST. 7IP	DESTIN EL 32541	=	E 4 CITY OT . 7ID		

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1). 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; 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

R. Eg Treas.

FILED

Mar 03 1998 8:00am