## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 748033** 

FILED Feb 20, 2006 Secretary of State

Entity Name: DESTIN LITTLE LEAGUE, INC.

Current Principal Place of Business: New Principal Place of Business:

P.O. BOX 5124 DESTIN, FL 32540

Current Mailing Address: New Mailing Address:

P.O. BOX 5124 DESTIN, FL 32540

FEI Number: 59-2037821 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DEHLINGER, PAT
618 SEA OATS DR.
DESTIN, FL 32541 US

CARTER, STEVE PRES.
827 JUNIPER CT.
DESTIN, FL 32541 US

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.

SIGNATURE: STEVE CARTER 02/20/2006

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ( ) Delete Title: PRES (X) Change ( ) Addition Name: DEHLINGER, PAT Name: CARTER, STEVE

 Address:
 618 SEA OATS DR.
 Address:
 827 JUNIPER CT.

 City-St-Zip:
 DESTIN, FL 32541
 City-St-Zip:
 DESTIN, FL 32541

Title: S ( ) Delete Title: SEC (X) Change ( ) Addition Name: PRIDGEN, STEPHEN R Name: TRAINOR, ANGIE

Address: 228 MATTIES WAY Address: 304 CYPRESS ST City-St-Zip: DESTIN, FL 32541 City-St-Zip: DESTIN, FL 32541

Title: TD ( ) Delete Title: TREA (X) Change ( ) Addition

 Name:
 BOSWELL, KENNETH
 Name:
 ANDRE, TERENCE

 Address:
 PO BOX 1872
 Address:
 250 MATTIES WAY

 City-St-Zip:
 DESTIN, FL 32540
 City-St-Zip:
 DESTIN, FL 32541

 $\label{eq:title: VD () Delete Title: VP (X) Change () Addition} \end{minipage}$ 

 Name:
 ANDRE, TERENCE
 Name:
 ANDERSON, CHRIS

 Address:
 250 MATTIES WAY
 Address:
 323 CYPRESS ST.

 City-St-Zip:
 DESTIN, FL 32541
 City-St-Zip:
 DESTIN, FL 32541

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEVE CARTER PRES 02/20/2006