2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#748033

Entity Name: DESTIN LITTLE LEAGUE, INC.

FILED Feb 17, 2007 Secretary of State

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

P.O. BOX 5124 799 HICKORY ST DESTIN, FL 32540 DESTIN, FL 32541

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 ()

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

CARTER, STEVE PRES.

827 JUNIPER CT.

DESTIN, FL 32541 US

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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: PAT DEHLINGER 02/17/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES () Delete Title: PRES (X) Change () Addition

 Name:
 CARTER, STEVE
 Name:
 DEHLINGER, PAT

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

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

Title: SEC () Delete Title: () Change () Addition

 Name:
 TRAINOR, ANGIE
 Name:

 Address:
 304 CYPRESS ST
 Address:

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

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

 Name:
 ANDRE, TERENCE
 Name:

 Address:
 250 MATTIES WAY
 Address:

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

Title: VP () Delete Title: () Change () Addition

 Name:
 ANDERSON, CHRIS
 Name:

 Address:
 323 CYPRESS ST.
 Address:

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

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: TERENCE ANDRE TREA 02/17/2007