
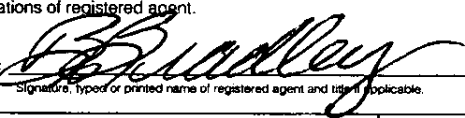



2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2007 8:00 am
Secretary of State

04-16-2007 90045 032 ****61.25

DOCUMENT # 756551 1. Entity Name INDIAN HILLS HOMEOWNERS' ASSOCIATION OF DESTIN, INC.					
Principal Place of Business P.O. BOX 1060 DESTIN, FL 32541 US			Mailing Address P.O. BOX 1060 DESTIN, FL 32540 US		
2. Principal Place of Business - No P.O. Box # 710 Legion Drive		3. Mailing Address Suite, Apt. #, etc.			
City & State Destin, FL		City & State			
Zip 32541		Country U.S.		Zip Country	
4. FEI Number 59-2213160				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent PETKOVIC, KATHIE 124 WISH LN. SANTA ROSA BEACH, FL 32459			7. Name and Address of New Registered Agent Name Brandi Bradley Street Address (P.O. Box Number is Not Acceptable) 710 Legion Drive, J-5 City Destin FL Zip Code 32541		
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 			DATE 4/4/07		
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ECKEL, MIKE D 710 LEGION DR. D-4 DESTIN, FL 32541	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President - PD Brandi Bradley 710 Legion Drive, J-5 Destin, FL 32541	
			<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD CRABTREE, ROBIN PO BOX 1113 PANAMA CITY, FL 32402	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer - TD Kellie Folley 610 Jeremy Ct. Crestview, FL 32539	
			<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PETKOVIC, KATHIE 124 WISH LN SANTA ROSA BCH, FL 32549	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director - D Alicia Barbour P.O. Box 6565 Miramar Beach, FL 32550	
			<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEWIS, RONALD 610 ALBATROSS MERRITT ISLAND, FL 32952	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director - D Ronnie Sweat 710 Legion Drive, B-4 Destin, FL 32541	
			<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD PETKOVIC, KATHIE 124 WISH LN. SANTA ROSA BEACH, FL 32459	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD DONALDSON, GUY 326 STAHLMAN AVE. DESTIN, FL 32541	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice - President - VD	
			<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
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: 			Date 4/4/07 Daytime Phone # 850 650 8596		