

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 760714

FILED  
Mar 07, 2009  
Secretary of State

**Entity Name:** DESTIN RACQUET CLUB TOWNHOMES OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

51 COURT DRIVE  
DESTIN, FL 32541 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1246  
DESTIN, FL 32540 US

**New Mailing Address:**

**FEI Number:** 59-2153447

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MELTON, NANCY  
510 GULF SHORE DR 1A  
DESTIN, FL 32541 US

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

SPIRES, WINTER E ATTY  
4477 LEGENDARY DRIVE  
SUITE 202  
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: WINTER E SPIRES

03/07/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: MARLER, LOUIS JR  
Address: 36 COURT DR  
City-St-Zip: DESTIN, FL 32541 US

Title: T ( ) Delete  
Name: MELTON, NANCY  
Address: 510 GULF SHORE DRIVE #1A  
City-St-Zip: DESTIN, FL 32541 US

Title: DV ( ) Delete  
Name: TUCKER, BARBARA  
Address: 50 COURT DR  
City-St-Zip: DESTIN, FL 32541 US

Title: S ( ) Delete  
Name: SCHWIEPPG, NANRIE  
Address: 35 CT DR  
City-St-Zip: DESTIN, FL 32541

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S (X) Change ( ) Addition  
Name: SCHWEPPE, LAURIE  
Address: 35 COURT DRIVE  
City-St-Zip: DESTIN, FL 32541

Title: D ( ) Change (X) Addition  
Name: BOLTON, KELLY  
Address: 24 COURT DRIVE  
City-St-Zip: DESTIN, FL 32541

I hereby certify that the information supplied with this filing does not qualify 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: LOUIS MARLER

PRES

03/07/2009

Electronic Signature of Signing Officer or Director

Date