

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 761799

FILED
Jan 27, 2009
Secretary of State

Entity Name: DOLPHIN POINT CONDOMINIUM ASSOCIATION OF DESTIN, INC.

Current Principal Place of Business:

30 MORENO POINT RD.
DESTIN, FL 32541

New Principal Place of Business:

Current Mailing Address:

30 MORENO PT. RD
SUITE 1
DESTIN, FL 32541 US

New Mailing Address:

FEI Number: 59-1802478

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NORTON, BETTY
30 MORENO PT RD 1
DESTIN, FL 32541 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: S/T () Delete
Name: DEAN, CARMELL
Address: 1751 CRAWLEY GAP ROAD
City-St-Zip: BLAIRSVILLE, GA 30512

Title: P () Delete
Name: HAYS, RICHARD
Address: 30 MORENO POINT RD #106B
City-St-Zip: DESTIN, FL 32541

Title: D () Delete
Name: KNOEPFLER, GLENN
Address: 5129 DAVID DRIVE
City-St-Zip: KENNER, LA 70065

Title: D () Delete
Name: CAMPBELL, BARBARA
Address: 415 BELLE MEADE DRIVE
City-St-Zip: MARIETTA, GA 30008

Title: D () Delete
Name: MONICAL, BRUCE
Address: PO BOX 101447
City-St-Zip: BIRMINGHAM, AL 35210

Title: VP () Delete
Name: MORGAN, KAY
Address: 4045 INDIAN TRAIL
City-St-Zip: DESTIN, FL 32541

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S/T (X) Change () Addition
Name: HILDA, CLARK
Address: 118 WEATHERSTONE PARKWAY
City-St-Zip: MARIETTA, GA 30068

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

Title: VP (X) Change () Addition
Name: SKINNER, MARSHALL
Address: 30 MORENO POINT ROAD 305B
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: BETTY C NORTON

MGR

01/27/2009

Electronic Signature of Signing Officer or Director

Date