2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#765749

FILED Mar 24, 2005 Secretary of State

Entity Name: DESTIN FISHING RODEO, INCORPORATED

Current Principal Place of Business: New Principal Place of Business: 103 STAHLMAN AVE DESTIN, FL 32541 US **Current Mailing Address: New Mailing Address:** PO BOX 296 DESTIN, FL 325400296 US FEI Number: 59-2281003 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: DONALDSON, HELEN K 326 STAHLMAN AVE DESTIN, FL 32541 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: SDM () Delete () Change () Addition DONALDSON, HELEN K Name: Name: 326 STAHLMAN AVE Address: Address: City-St-Zip: DESTIN, FL 32541 City-St-Zip: Title: PD () Delete Title: (X) Change () Addition KROEGER, CHESTER Name: KROEGER, CHESTER Name: Address: 20001-A EMERALD COAST PARKWAY Address: 20001-A EMERALD COAST PARKWAY City-St-Zip: DESTIN, FL 32541 City-St-Zip: DESTIN, FL 32541 Title: VD. Title: PD (X) Change () Addition () Delete HORD, RICK HORD, RICK Name: Name: 8 HAMPTON CT. 8 HAMPTON CT. Address: Address: City-St-Zip: MARY ESTHER, FL 32569 City-St-Zip: MARY ESTHER, FL 32569 Title: Title: () Change () Addition () Delete Name: LEO, COLLINS Name: 398 EVERGREEN CIRCLE Address: Address: City-St-Zip: DESTIN, FL 32541 City-St-Zip: Title: () Delete Title: () Change () Addition BROOM, TIM Name: Name: 211 SNAPPER DRIVE Address: Address: City-St-Zip: DESTIN, FL 32541 City-St-Zip: Title: () Delete Title: (X) Change () Addition ATWELL, CLIFF WAGNER, JIM Name: Name: Address: 724 ELISE LANE Address: 743 VINTAGE CIRCLE DESTIN, FL 32541 DESTIN, FL 32541 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: HELEN K DONALDSON SDM 03/24/2005