2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2009
Secretary of State

DOCUMENT# H95598

Entity Name: BRW BUILDERS OF DESTIN, INC.

Current Principal Place of Business:

130 S. GERONIMO ST.
SUITE 5
DESTIN, FL 32550 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 6397
DESTIN, FL 32550 US

New Mailing Address:

FEI Number: 59-2662951 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILLIAMS, DAVID
4093 INDIAN BAYOU NORTH
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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: WILLIAMS, DAVID W.
Address: 4093 INDIAN BAYOU NORTH
City-St-Zip: DESTIN, FL 32541

Title: DS ( ) Delete
Name: BORGEN, MARK
Address: 825 JUNIPER CT
City-St-Zip: DESTIN, FL 32541

Title: DV ( ) Delete
Name: SHORES, TIMM R.
Address: 159 CALHOUN AVE.
City-St-Zip: DESTIN, FL 32541

Title: DT ( ) Delete
Name: ZDANIS, MICHAEL
Address: 19 SUGAR COVE ROAD
City-St-Zip: SANTA ROSA BEACH, FL 32459

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

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID WILLIAMS DP 04/15/2009

Electronic Signature of Signing Officer or Director Date