

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K24178

Entity Name: DESTIN BEACH, INC.

FILED
Apr 25, 2008
Secretary of State

Current Principal Place of Business:

C/O ANN BELL
681 SE HIDDEN RIVER DR
PORT SAINT LUCIE, FL 34983

New Principal Place of Business:

Current Mailing Address:

C/O ANN BELL
681 SE HIDDEN RIVER DR
PORT SAINT LUCIE, FL 34983

New Mailing Address:

FEI Number: 59-2905818

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BELL, LLOYD F JR.
C/O ANN BELL
1& 2 IDABELLE IS
FORT PIERCE, FL 34982 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: P () Delete
Name: BELL, LLOYD F JR.
Address: 681 SE HIDDEN RIVER DR
City-St-Zip: PORT SAINT LUCIE, FL 34983

Title: ST () Delete
Name: BELL, CARMELA A
Address: 1018 US 98
City-St-Zip: DESTIN, FL 32541

Title: D () Delete
Name: BELL, ANN W
Address: 681 SE HIDDEN RIVER DR
City-St-Zip: PORT SAINT LUCIE, FL 34983

Title: SH () Delete
Name: BELL, CHRISTINA R
Address: 1270 NE 103RD ST
City-St-Zip: MIAMI, FL 33138

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: LLOYD F. BELL, JR.

PRES

04/25/2008

Electronic Signature of Signing Officer or Director

Date