

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000006058

FILED
Jan 08, 2008
Secretary of State

Entity Name: DESTINATION PROPERTIES LLC

Current Principal Place of Business:

42 PRESTON PATH
SANTA ROSA BEACH, FL 32459 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 2579
SANTA ROSA BEACH, FL 32459 US

New Mailing Address:

FEI Number: 75-3104333

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.
13302 WINDING OAKS BLVD
SUITE A-100
TAMPA, FL 336123425 US

Name and Address of New Registered Agent:

ALL FLORIDA FIRM, INC
813 DELTONA BLVD
SUITE A
DELTONA, FL 32725 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: DONNA L SERPA

01/08/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MILES, PHILLIP D
Address: PO BOX 2579
City-St-Zip: SANTA ROSA BEACH, FL 32550

Title: MGRM () Delete
Name: MILES, TOBY S
Address: 81 ST. SIMON CIRCLE
City-St-Zip: DESTIN, FL 32550

Title: MGRM () Delete
Name: MILES, C. D
Address: PO BOX 2579
City-St-Zip: SANTA ROSA BEACH, FL 32459

ADDITIONS/CHANGES:

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: PHILLIP D MILES

MGRM

01/08/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date