

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000031526

FILED  
Jan 03, 2007  
Secretary of State

**Entity Name:** DESTIN REAL ESTATE INVESTMENTS, L.L.C.

**Current Principal Place of Business:**

502 OSCEOLA DRIVE  
DESTIN, FL 32541

**New Principal Place of Business:**

18 NORRIEGO RD.  
DESTIN, FL 32541

**Current Mailing Address:**

502 OSCEOLA DRIVE  
DESTIN, FL 32541

**New Mailing Address:**

18 NORRIEGO RD.  
DESTIN, FL 32541

**FEI Number:** 16-1681202

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BLACK, JAMES E MR.  
212 MATTIES WAY  
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

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: MURDOCK, JERRY F MR.  
Address: 502 OSCEOLA DRIVE  
City-St-Zip: DESTIN, FL 32541 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: MURDOCK, JERRY F MR.  
Address: 18 NORRIEGO RD.  
City-St-Zip: DESTIN, FL 32541 US

Title: MGRM ( ) Change (X) Addition  
Name: SHELTON, DARRYL Z MR.  
Address: 18 NORRIEGO RD.  
City-St-Zip: DESTIN, FL 32541

I hereby certify that the information supplied with this filing does not qualify for the 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:** DARRYL Z. SHELTON

MGRM

01/03/2007

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