

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000030249

FILED  
Apr 28, 2009  
Secretary of State

Entity Name: HURRICANES OF DESTIN, LLC

**Current Principal Place of Business:**

2 HARBOUR BLVD  
DESTIN, FL 32541

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 5917  
DESTIN, FL 32540

**New Mailing Address:**

537 STAHLMAN AVENUE  
DESTIN, FL 32541

FEI Number: 51-0563920

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

TINGLE, D. CRAIG ESQUIRE  
537 STAHLMAN AVE  
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: MGRM ( ) Delete  
Name: TINGLE, D. CRAIG ESQUIRE  
Address: 535 STAHLMAN AVENUE  
City-St-Zip: DESTIN, FL 32541

Title: MGR ( ) Delete  
Name: BOURBON STREET VENTURES EAST, LLC  
Address: 3411 W 15TH ST  
City-St-Zip: PANAMA CITY, FL 32401

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: TINGLE, D. CRAIG ESQUIRE  
Address: 537 STAHLMAN AVENUE  
City-St-Zip: DESTIN, FL 32541

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: D. CRAIG TINGLE

MGRM

04/28/2009

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