


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 10, 2007 08:00 A
Secretary of State

DOCUMENT # M70606 1. Entity Name DESTIN POINTE REALTY, INC.	
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Principal Place of Business 480 GULF SHORE DR DESTIN, FL 32541 US	Mailing Address 480 GULF SHORE DR DESTIN, FL 32541 US
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DO NOT WRITE IN THIS SPACE



03282007 No Chg-P CR2E034 (11/05)

4. FEI Number 57-0868451	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

WATSON, DONNA
480 GULF SHORE DR
DESTIN, FL 32541

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstalling) DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD BUNYARD, P. STEPHEN 480 GULF SHORE DR DESTIN, FL 32541
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS MARCUS, ELLIOT 4447 COMMONS DRIVE EAST SUITE 110 DESTIN, FL 32541
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WATSON, DONNA 480 GULF SHORE DRIVE DESTIN, FL 32541
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04/19/07-80041-017 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Donna Watson 4/5/07 (850)837-4800
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #