2005 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

Jan 31, 2005 8:00 am Secretary of State DOCUMENT # M94893 1. Entity Name 01-31-2005 90051 016 ***150.00 DESTY, INC. Principal Place of Business Mailing Address 3595 GORDON DRIVE NAPLES FL 34102 3595 GORDON DRIVE 40008686 NAPLES FL 34102 US 2. Principal Place of Business Mailing Address 0. Box Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (10/04) 1st MOORE City & State 4. FEI Number Applied For 65-0065005 Not Applicable Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired 34106 Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent RYAN, JEAN S ESQ Number is Not Acceptable) BOND, SCHOENECK + KING, P.R. 4001 TAMIAMI TRAIL NORTH, SUITE 250 NAPLES FL 34103 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. TVCdisauto Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State: OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 THILE TITI F Delete Change ___ Addition YAWNEY, EDWARD T. NAME HAME 3595 GORDON DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP NAPLES FL CITY-ST-ZIP D Defete TITLE THILE ☐ Change ☐ Addition YAWNEY, SUSAN O. NAME STREET ADDRESS 3595 GORDON DR STREET ADDRESS CITY-ST-ZIP NAPLES FL CITY-ST-ZIP D. TITLE Delete ☐ Change ■ Addition NAME YAWNEY, J. DEVON NAME STREET ADDRESS 3595 GORDON DR STREET ADDRESS CUY-ST-7IP NAPLES FL CITY-ST-7IP D TITLE Delete TITLE ☐ Change ■ Addition YAWNEY, P. TAYLOR NAME NAME 3595 GORDON DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP NAPLES FL CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

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