2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2007
Secretary of State

DOCUMENT# N00000006645

Entity Name: NOAH'S ARK OF DESTIN, INC.

Current Principal Place of Business:

250 INDIAN BAYOU TRAIL
DESTIN, FL 32541

New Principal Place of Business:

Current Mailing Address:

250 INDIAN BAYOU TRAIL
DESTIN, FL 32541

New Mailing Address:

FEI Number: 59-3675795 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NEWMAN, RAYMOND F JR
348 MIRACLE STRIP PARKWAY SW STE 7
FT WALTON BEACH, FL 32548 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

OFFICERS AND DIRECTORS:

Title:	D	( ) Delete
Name:	DOBB, JAMES M	
Address:	347 PRIMROSE CIRCLE	
City-St-Zip:	DESTIN, FL 32541	
Title:	D	( ) Delete
Name:	ROBERTSON, CHARLENE	
Address:	708 PLANET DR.	
City-St-Zip:	DESTIN, FL 32541	
Title:	D	( ) Delete
Name:	HESSE, MICHAEL E	
Address:	504 MAIN STREET	
City-St-Zip:	DESTIN, FL 32541	
Title:	D	( ) Delete
Name:	JACKSON, FLORENCE	
Address:	4088 INDIAN BAYOU NORTH	
City-St-Zip:	DESTIN, FL 32541	
Title:	D	( ) Delete
Name:	WRIGHT, CHERYL	
Address:	520 BENNING DR.	
City-St-Zip:	DESTIN, FL 32541	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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 for the exemption stated 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHERYL A. WRIGHT D 04/24/2007

Electronic Signature of Signing Officer or Director — Date