


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2006 8:00 am
Secretary of State

04-17-2006 90388 048 ****61.25

DOCUMENT # N01396	
1. Entity Name DESTIN TOWERS CONDOMINIUM OWNERS' ASSOCIATION, INC.	

Principal Place of Business 1008 HWY 98 EAST DESTIN, FL 32541	Mailing Address 321 HWY 98 E DESTIN, FL 32541
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

40051777



04122006 Chg-NP CR2E037 (11/05)

4. FEI Number 59-2359489	Applied For <input type="checkbox"/> 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 PETERSON, DALE E 321 HIGHWAY 98 EAST DESTIN, FL 32541		7. Name and Address of New Registered Agent Name <i>Emerald Coast Vacation Rentals & Sales</i> Street Address (P.O. Box Number is Not Acceptable) <i>12273 Emerald Coast Pkwy Ste 110</i> <i>1</i> City <i>Destin</i> FL Zip Code <i>32550</i>	
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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 <i>Judy Rodriguez</i> <small>Signature typed or printed name of registered agent and file if applicable.</small>	<i>Judy Rodriguez, CAM</i> 4/13/06 <small>(NOTE: Registered Agent signature required when reinstating.) DATE</small>

Filing Fee is \$61.25 Due by May 1, 2006	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST CHAMPAGN, GERRY 603 DESERT OAK DR PENSACOLA, FL 32541 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Champagn, Gerry 3179 Marcus Point Blvd Pensacola FL 32505
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEVINSON, STEPHANIE 5420 JANICE AVE KENNER, LA 70065 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Pres <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Denton, Midge 1008 Hwy 98E, Unit 33 Destin, FL 32541
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CENAC, CINDY 3661 BAYOU BLACK DR HOUMA, LA 70360 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Matlock, Mark 350 Riverchase Rd Lenoir City, TN 37772
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PARUZZI, CHARLIE 1512 ST CHARLES PLACE MURFREESBORO, TN 37129 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BREMEN, LALLY 1008 HWY 98 EAST DESTIN, FL 32541 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D REA, STAN 1308 SOUTH GOYER RD KIRKWOOD, MO 63122 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Rea, Stan 1308 South Geyer Rd Kirkwood, MO 63122

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 617, 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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SIGNATURE: <i>Gayle T. Denton</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	Date <i>4-12-06</i>	Daytime Phone #
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