


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

<b>DOCUMENT # N01396</b> <b>1. Entity Name</b> DESTIN TOWERS CONDOMINIUM OWNERS' ASSOCIATION, INC.			
<b>Principal Place of Business</b> 1008 HWY 98 EAST DESTIN, FL 32541		<b>Mailing Address</b> 321 HWY 98 E DESTIN, FL 32541	
<b>2. Principal Place of Business - No P.O. Box #</b> Suite, Apt. #, etc.		<b>3. Mailing Address</b> 1008 Hwy 98 East Suite, Apt. #, etc.	
<b>City &amp; State</b> Destin, FL		<b>City &amp; State</b> Destin, FL	
<b>Zip</b> 32541	<b>Country</b>	<b>Zip</b> 32541	<b>Country</b>
<b>6. Name and Address of Current Registered Agent</b> EMERALD COAST VACATION RENTALS & SALES 12273 EMERALD COAST PKWY SUITE 110 DESTIN, FL 32550		<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
<b>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.</b> SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when restateing) DATE</small>			
<b>Filing Fee is \$61.25</b> <b>Due by September 14, 2007</b>		<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
<b>10. OFFICERS AND DIRECTORS</b>		<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>	
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	<b>ST</b> CHAMPAGN, GERRY 3179 MARCUS POINT BLVD PENSACOLA, FL 32505	<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	Treasurer 300109594993 09/18/07--01069--002 **61.25
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	<b>D</b> LEVINSON, STEPHANIE 5420 JANICE AVE KENNER, LA 70065	<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	President 0 SCOTT Starks 9684 North 800 West Doleville, IN 47334
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	<b>D</b> MATLOCK, MARK 350 RIVERCHASE RD LENOIR CITY, TN 37772	<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	VP REA, STAN 1308 SOUTH GEYER RD KIRKWOOD, MO 63122
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	<b>P</b> DENTON, MIDGE 1008 HWY 98 EAST UNIT 33 DESTIN, FL 32541	<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	D REA, STAN 1308 SOUTH GOYER RD KIRKWOOD, MO 63122
<b>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.</b>			
<b>SIGNATURE:</b> Mark Matlock		8/1/07 850-837-3923	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date Daytime Phone #</small>	

FILED  
07 SEP 14 AM 11:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



07172007 Chg-NP CR2E037 (12/06)

4. FEI Number 59-2359489 Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required