2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01842

Apr 07, 2006 Secretary of State

Entity Name: DESTIN BEACH CLUB OWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

1150 HWY 98 1150 SCENIC HWY 98 DESTIN, FL 32541 DESTIN, FL 32541

Current Mailing Address: New Mailing Address:

1150 HWY 98 1150 SCENIC HWY 98 DESTIN, FL 32541 DESTIN, FL 32541

FEI Number: 59-2458838 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BURKE, LES W 303 MAGNOLIA AVENUE PANAMA CITY, FL

OFFICERS AND DIRECTORS:

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

BROSS, HAROLD BROSS, HAROLD Name: Name: 37 ROSEDOWN Address: 37 ROSEDOWN Address: City-St-Zip: DESTREHAN, LA City-St-Zip: DESTREHAN, LA

Title: Title: VPD (X) Change () Addition () Delete WILDER, BOB Name: WILDER, BOB Name:

Address: 3443 DELL GLADE DR Address: 3443 DELL GLADE DR City-St-Zip: MEMPHIS, TN 38111 City-St-Zip: MEMPHIS, TN 38111

Title: (X) Delete Title: () Change () Addition

MCKAY, GERI Name: Name: 1138 MAYNARD DRIVE Address: Address: City-St-Zip: INDIANAPOLIS, IN 46227 City-St-Zip:

Title: PD () Delete Title: PD (X) Change () Addition

Name: SANDEL, LARRY Name: SANDEL, LARRY 250 BRAEBURN CIRCLE 608 CRABAPPLE WAY Address: Address: City-St-Zip: MARBLE FALLS, TX 78654 City-St-Zip: MCKINNEY, TX 75070

Title: () Delete Title: (X) Change () Addition

RIEGER, KORDULA RIEGER, KORDULA Name: Name:

20 HAMPTON CIRCLE 1111 SANTA ROSA BLVD. #104 Address: Address: City-St-Zip: NICEVILLE, FL City-St-Zip: FT. WALTON BEACH, FL 32548

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: LARRY SANDEL Ρ 04/07/2006