2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005329

FILED Apr 03, 2006 Secretary of State

US

Entity Name: MACK BAYOU POINTE ASSOCIATION OF DESTIN INC.

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

10859 EMERALD COAST PKWY WEST BEACON WAY

204 PMB 125 SANTA ROSA BEACH, FL 32459

DESTIN, FL 32550 US

Current Mailing Address: New Mailing Address:

10859 EMERALD COAST PKWY WEST 10221 EMERALD COAST PKWY

204 PMB 125 SUITE 23

DESTIN, FL 32550 US MIRAMAR BEACH, FL 32550 US

FEI Number: 13-4260335 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:

RIDLEY, LYNLEE GELDER, JAY B

43 BEACON WAY 10221 EMERALD COAST PKWY WEST

SANTA ROSA BEACH, FL 32459 US SUITE 23

MIRAMAR BEACH, FL 32550 US

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: JAY B. GELDER 04/03/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: S () Delete Title: SD (X) Change () Addition

 Name:
 RIDLEY, LYNLEE

 Address:
 43 BEACON WAY

 Address:
 43 BEACON WAY

Address:
Address:

City-St-Zip: SANTA ROSA BEACH, FL 32459 City-St-Zip: SANTA ROSA BEACH, FL 32459

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

Name: HERBERMAN, SHEILA Name: TICKNOR, STEVE
Address: 216 BEACON WAY Address: 98 BEACON WAY

City-St-Zip: SANTA ROSA BEACH, FL 32459 City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: T () Delete Title: D (X) Change () Addition Name: CUSHING, KAREN Name: CUSHING, PAT

Address: 55 INLET DR Address: 55 INLET DR

City-St-Zip: SANTA ROSA BEACH, FL 32459 City-St-Zip: SANTA ROSA BEACH, FL 32459

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

 Name:
 ERICKSEN, WAYNE
 Name:
 THORNTON, STEVE

 Address:
 388 BEACON WAY
 Address:
 1464 RADSTONE DRIVE

 City-St-Zip:
 SANTA ROSA BEACH, FL 32459
 City-St-Zip:
 LAWRENCEVILLE, GA 30044

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

Name: Name: GERBING, ANGIE
Address: Address: 96 BEACON WAY

City-St-Zip: City-St-Zip: SANTA ROSA BEACH, FL 32459

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: STEVE TICKNOR PD 04/03/2006