2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N05000012270

T FILED
Jul 18, 2008
Secretary of State

Entity Name: INDIAN LAKE HOMEOWNERS ASSOCIATION AT DESTIN, INC.

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

4020 DANCING CLOUD COURT DESTIN, FL 32550

Current Mailing Address: New Mailing Address:

1008 AIRPORT ROAD SUITE C DESTIN, FL 32541

FEI Number: 20-3948038 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:

LEUCHTMAN, GARY B
501 COMMENDENCIA STREET
PENSACOLA, FL 32502 US
LAIRD, RICHARD F
4060 DANCING CLOUD CT
DESTIN, FL 32541 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: RICHARD F LAIRD 07/18/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD () Delete Title: () Change () Addition

 Name:
 O'NEAL, ALAN M
 Name:

 Address:
 101-A BUSINESS CENTRE DRIVE
 Address:

Address: 101-A BUSINESS CENTRE DRIVE Address:
City-St-Zip: DESTIN, FL 32550 City-St-Zip:

Title: VSD () Delete Title: () Change () Addition

 Name:
 SMITH, WILLIAM H
 Name:

 Address:
 543 HARBOR BOULEVARD, SUITE 102
 Address:

 City-St-Zip:
 DESTIN, FL 32541
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 LAWSON, JULIE
 Name:

 Address:
 4039 EAST COUNTY HIGHWAY 30-A
 Address:

 City-St-Zip:
 SEAGROVE BEACH, FL 32459
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: RICHARD F LAIRD CAM 07/18/2008