

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000012916

FILED  
Feb 05, 2007  
Secretary of State

Entity Name: DESTIN FIRE RESCUE FOUNDATION, INC.

**Current Principal Place of Business:**

848 AIRPORT ROAD  
DESTIN, FL 32541

**New Principal Place of Business:**

**Current Mailing Address:**

848 AIRPORT ROAD  
DESTIN, FL 32541

**New Mailing Address:**

FEI Number: 20-8112560

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

METZ, BOBBIE J  
848 AIRPORT ROAD  
DESTIN, FL 32541 US

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

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

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: BAUGH, MARK E  
Address: 2 THIRD STREET  
City-St-Zip: SHALIMAR, FL 32579

Title: DV ( ) Delete  
Name: D'AGOSTINO, JOSEPH J  
Address: 710 LEGION DRIVE, #M-4  
City-St-Zip: DESTIN, FL 32541

Title: DP ( ) Delete  
Name: FEATHERSTON, GREGORY E  
Address: 74-B CREST DRIVE  
City-St-Zip: MIRAMAR, FL 32550

Title: D ( ) Delete  
Name: LAMBERT, CHRISTOPHER S  
Address: 86 TARPON STREET  
City-St-Zip: DESTIN, FL 32541

Title: DS ( ) Delete  
Name: METZ, PHILIP D  
Address: 3900 INDIAN TRAIL  
City-St-Zip: DESTIN, FL 32541

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: PHILIP D. METZ

DS

02/05/2007

Electronic Signature of Signing Officer or Director

Date