2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37417

FILED Apr 04, 2008 Secretary of State

Entity Name: DESTIN ROTARY SCHOLARSHIP FUND, INC.

Current Principal Place of Business: New Principal Place of Business: 986A AIRPORT RD DESTIN, FL 32540 US **Current Mailing Address: New Mailing Address:** PO BOX 951 DESTIN, FL 32540 US FEI Number: 59-3051188 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: MCGILL, ROBERT E 36068 EMERALD COAST PKWY DESTIN, FL 32541 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete POON, WILL EMERSON, DAVID Name: Name: 148 BAIRD RD Address: 559 KELLY STREET Address: City-St-Zip: SANTA ROSA BEACH, FL 32459 City-St-Zip: DESTIN, FL 32541 Title: () Delete Title: (X) Change () Addition EMERSON, DAVID Name: DYKES, HAYWARD Name: Address: 559 KELLY STREET Address: 2468 COUNTY HIGHWAY 3280 City-St-Zip: DESTIN, FL 32541 City-St-Zip: FREEPORT, FL 32439 Title: () Delete Title: (X) Change () Addition WERNET, LOCKWOOD JONES, CRAWFORD Name: Name: 160 INDIAN BAYOU DRIVE Address: 335 CHERIE CT. NW Address: City-St-Zip: FT WALTON BEACH, FL 32548 City-St-Zip: DESTIN, FL 32541 Title: () Delete Title: (X) Change () Addition DYKES, HAYWARD Name: Name: VAUGHN, CHRIS 2468 COUNTY HIGHWAY 3280 Address: Address: 912 BAY GROVE ROAD City-St-Zip: FREEPORT, FL 32439 City-St-Zip: FREEPORT, FL 32439 Title: () Delete Title: () Change () Addition OTT, DAVID Name: Name: 107 MARK STREET Address: Address: City-St-Zip: DESTIN, FL 32541 City-St-Zip: Title: (X) Delete Title: () Change () Addition THOMASON, ERIC Name: Name: Address: 99 BLUE HERON DRIVE NORTH Address: SANTA ROSA BEACH, FL 32459 City-St-Zip: 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: KEVIN D. BOWYER MR. 04/04/2008