2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000001672

FILED Apr 27, 2006 Secretary of State

Entity Name: EAGLES LANDING OF DESTIN PROPERTY OWNERS ASSOCIATION, INC.

Current Pi	rincipal Place	of Business:	New Princip	New Principal Place of Business:		
4400 HWY SUITE 313 NICEVILLE		US				
	ailing Addres		New Mailing	New Mailing Address:		
P.O BOX 5	_	US	•	,		
FEI Number:	59-3242792	FEI Number Applied For ()	FEI Number Not Applica	able () Certific	cate of Status Desired ()	
Name and	Address of C	Current Registered Agent:	Name and A	ddress of New Re	gistered Agent:	
PO BOX 52	RGER, DARL/ 263 E, FL 32578	ANE US	4400 HWY 2 SUITE 313	GER, DARLANE 0 EAST FL 32578 US		
	named entity : e of Florida.	submits this statement for the pu	rpose of changing its	registered office or	registered agent, or both,	
SIGNATUF	RE:				04/27/2006	
	Electror	ic Signature of Registered Agen	t		Date	
OFFICERS	S AND DIREC	TORS:	ADDITIONS	CHANGES TO OF	FICERS AND DIRECTORS	:
Title: Name: Address: City-St-Zip:	PD () HOPE, DIANA 4022 LAUREN DESTIN, FL 32		Title: Name: Address: City-St-Zip:	() Change	e () Addition	
Title: Name: Address: City-St-Zip:	TD () DICKEY, GENE 4030 KATS CO DESTIN, FL 32	URT	Title: Name: Address: City-St-Zip:	()Change	e () Addition	
Title: Name: Address: City-St-Zip:	SD () DEAN, KEVIN 4039 KATS CO DESTIN, FL 32		Title: Name: Address: City-St-Zip:	()Change	e () Addition	
Title: Name: Address: City-St-Zip:	VD () BARKER, DED 4025 LAUREN DESTIN, FL 32	СТ	Title: Name: Address: City-St-Zip:	()Change	e()Addition	
Title: Name: Address: City-St-Zip:	D (X LINDNER, JOE 343 SKYLER R DESTIN, FL 32	UN	Title: Name: Address: City-St-Zip:	()Change	e () Addition	

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: DIANA HOPE	PD	04/27/2006
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