

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001826

FILED
Jan 19, 2009
Secretary of State

Entity Name: DESTINY BY THE SEA OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

SCENIC OLD HWY 98
DESTIN, FL 32541 US

New Principal Place of Business:

4811 OCEAN BLVD
DESTIN, FL 32541 US

Current Mailing Address:

4811 OCEAN BLVD
DESTIN, FL 32541 US

New Mailing Address:

FEI Number: 59-3371733 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

COASTAL PROPERTIES ASSOCIATION
ZACH JOHNSON
36132 EMERALD COAST PKWY
DESTIN, FL 32541 US

Name and Address of New Registered Agent:

WHITE, JO ANN MGR.
4811 OCEAN BLVD
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: JO ANN WHITE

01/19/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FELICE, TOM
Address: 4785 OCEAN BLVD
City-St-Zip: DESTIN, FL 32541

Title: VP () Delete
Name: ELWELL, BETSY
Address: 4759 OCEAN BLVD
City-St-Zip: DESTIN, FL 32541

Title: ST () Delete
Name: NEESE, STEPHEN
Address: 231 EDGEWATER DR
City-St-Zip: CHAPIN, SC 29036

Title: D () Delete
Name: BARKER, KEITH
Address: 312 BARKER DR
City-St-Zip: MOODY, AL 35004

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: FELICE, TOM
Address: 4785 OCEAN BLVD
City-St-Zip: DESTIN, FL 32541

Title: P (X) Change () Addition
Name: ELWELL, BETSY
Address: 4759 OCEAN BLVD
City-St-Zip: DESTIN, FL 32541

Title: ST (X) Change () Addition
Name: SOLOMON, CHRISTINE
Address: 4822 OCEAN BLVD
City-St-Zip: DESTIN, FL 32541

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

Title: D () Change (X) Addition
Name: LINCOLN, JAMES
Address: POB 1559
City-St-Zip: SIKESTON, MO 63801

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: ELIZABETH ELWELL

P

01/19/2009

Electronic Signature of Signing Officer or Director

Date