2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002179

Entity Name: THE DESTIN OPTIMIST CLUB, INC.

FILED Jul 14, 2009 Secretary of State

Current Principal Plac	e of Business:	New Princi	pal Place of Business

POST OFFICE BOX 876 4404 SONOMA CIRCLE DESTIN, FL 32741 NICEVILLE, FL 32578

Current Mailing Address: New Mailing Address:

POST OFFICE BOX 876
DESTIN, FL 32741
POST OFFICE BOX 876
DESTIN, FL 32540

FEI Number: 36-3989575 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

HOPKINS, WILLIAM

10859 EMERALD COAST PKWY 4310

MIRAMAR BEACH, FL 32550 US

NAVARRE, ERIC J

4404 SONOMA CIRCLE

NICEVILLE, FL 32578 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: ERIC J NAVARRE 07/14/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: P (X) Change () Addition Name: FELL, CATHY Name: NAVARRE, ERIC

Address: 315 SAILFISH CIR Address: 4404 SONOMA CIRCLE
City-St-Zip: DESTIN, FL 32541 City-St-Zip: NICEVILLE, FL 32578

Title: P () Delete Title: VP (X) Change () Addition

 Name:
 HOPKINS, BILL
 Name:
 JOB, AMANDA

 Address:
 19859 EMERALD COAST PKWY
 Address:
 608 LEGION DRIVE

 City-St-Zip:
 MIRAMAR, FL 32550
 City-St-Zip:
 DESTIN, FL 32541

Title: VP () Delete Title: ST (X) Change () Addition Name: NIEMIEC, GREG Name: MORGAN, AUBREY

 Address:
 609 CALHOUN AVE
 Address:
 578 WINGSPAN WAY

 City-St-Zip:
 DESTIN, FL 32541
 City-St-Zip:
 CRESTVIEW, FL 32536

Title: ST (X) Delete Title: () Change () Addition

 Name:
 HOPKINS, PEGGY
 Name:

 Address:
 10807 EMERALD COAST PKWY 4-310
 Address:

 City-St-Zip:
 MIRAMAR BEACH, FL 32550
 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: ERIC J NAVARRE P 07/14/2009