

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N96000004192

1. Entity Name

DESTIN RESTAURANT ASSOCIATION, INC.

FILED
Jun 19, 2000 8:00 am
Secretary of State

06-19-2000 90006 039 ****61.25

Principal Place of Business

Mailing Address

25 WALTER MARTIN ROAD NE
FORT WALTON BEACH FL 32548

25 WALTER MARTIN ROAD NE
FORT WALTON BEACH FL 32548-4937

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

DESTIN FL

FI

Zip

Country

32541

Country

4. FEI Number

39-3400063

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GRIMSLEY, JAMES W
25 WALTER MARTIN ROAD NE
FORT WALTON BEACH FL 32548

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
EMPSON, DAN
110 B. PALMETTO DR
DESTIN FL ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PRESIDENT
TOM RICE
~~4074 MIDLAND TRAIL~~ 76 Hwy 98 E.
DESTIN, FL 32541 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
RICE, TOM
110 B. PALMETTO DR
DESTIN FL ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VICE PRESIDENT
DAN EMPSON
76 Hwy 98 E.
DESTIN FL 32541 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
THORN, RUSS
110 B PALMETTO DR
DESTIN FL ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SECRETARY/Treasurer
Sam Seewers
76 Hwy 98 E.
DESTIN, FL 32541 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
KRANZ, THOMAS
110 B PALMETTO DR
DESTIN FL ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
PARKER, WENDY
110 B PALMETTO DR
DESTIN FL ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)