

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90825 010 ****61.25

DOCUMENT # N97000002211					
1. Entity Name PHASE 4 OF DESTINY EAST OWNERS ASSOCIATION, INC.					
Principal Place of Business 12273 US HWY 98 208 MIRAMAR BEACH, FL 32550 US			Mailing Address C/O SUNCOAST ASSOCIATION MANAGEMENT 12273 US HWY 98 SUITE 208 MIRAMAR BEACH, FL 32550 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-3453238	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SCOTT, WALTER D 12273 US HWY 98 SUITE 208 MIRAMAR BEACH, FL 32550			7. Name and Address of New Registered Agent Name: <u>Walt Lehrer</u> Street Address (P.O. Box Number is Not Acceptable): <u>12273 U.S. Hwy 98, Suite 208</u> City: <u>Destin</u> FL <u>32550</u>		
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. I am familiar with, and accept the obligations of registered agent. SIGNATURE: <u>[Signature]</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE P NAME KIEP, DUANE STREET ADDRESS 1799 W HEWITT RD CITY-ST-ZIP PORT SAINT JOE, FL 32457	<input checked="" type="checkbox"/> Delete				
TITLE V NAME GILBERT, LARRY STREET ADDRESS 12303 HUMMERBIRD WAY CITY-ST-ZIP GEORGETOWN, IN 47122	<input checked="" type="checkbox"/> Delete				
TITLE ST NAME KIRBY, GREGG STREET ADDRESS 2748 SUN RUNNER LANE CITY-ST-ZIP GULF BREEZE, FL 32563	<input checked="" type="checkbox"/> Delete				
TITLE ST NAME Dan Curtis STREET ADDRESS 677 Tranquility Lane CITY-ST-ZIP Destin, FL 32541	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 <u>[Signature]</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date: <u>April 23, 2007</u> Daytime Phone #: <u>(850) 654-7330</u>			

40092417



01092007 Chg-NP CR2E037 (12/06)