2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jul 05, 2007
Secretary of State

DOCUMENT# P00000006325

Entity Name: DESTIN WEST RESORT MANAGEMENT, INC.

Current Principal Place of Business:

1500 MIRACLE STRIP PARKWAY SE
FT WALTON BEACH, FL 32548 US

New Principal Place of Business:

1320 MIRACLE STRIP PARKWAY
SUITE 100
FT WALTON BEACH, FL 32548 US

Current Mailing Address:

1500 MIRACLE STRIP PARKWAY SE
FT WALTON BEACH, FL 32548 US

New Mailing Address:

1320 MIRACLE STRIP PARKWAY
SUITE 100
FT WALTON BEACH, FL 32548 US

FEI Number: 56-2288309 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SALVATORI & WOOD, P.L.
4001 TAMIAMI TRAIL NORTH
SUITE 330
NAPLES, FL 34103 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DPS ( ) Delete
Name: TOLBERT, FRED E III
Address: 1500 MIRACLE STRIP PARKWAY SE
City-St-Zip: FT WALTON BEACH, FL 32548 US

Title: VP ( ) Delete
Name: KREUSER, WIILLIAM G
Address: 1500 MIRACLE STRIP PARKWAY SE
City-St-Zip: FT WALTON BEACH, FL 32548 US

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change ( ) Addition
Name: TOLBERT, FRED E III
Address: 1320 MIRACLE STRIP PARKWAY, SUITE 100
City-St-Zip: FT WALTON BEACH, FL 32548 US

Title: VP (X) Change ( ) Addition
Name: KREUSER, WIILLIAM G
Address: 1320 MIRACLE STRIP PARKWAY, SUITE 100
City-St-Zip: FT WALTON BEACH, FL 32548 US

Title: D ( ) Change (X) Addition
Name: CLUCK, GAIL
Address: 1320 MIRACLE STRIP PARKWAY, SUITE 100
City-St-Zip: FT WALTON BEACH, FL 32548 US

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FRED E. TOLBERT, III PS 07/05/2007

Electronic Signature of Signing Officer or Director Date