2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 30, 2006 8:00 am
Secretary of State
05-15-2006 90041 009 ***150.00

DOCUMENT # P04000035296

1. Entity Name
R G & T OF DESTIN, INC.

Principal Place of Business	Mailing Address
1860 MIDTOWN DR COLUMBUS, GA 31906	1860 MIDTOWN DR COLUMBUS, GA 31906

66021086

04252006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-0881523
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

SCHEYD, JOSEPH M JR.
1221 AORPORT ROAD
SUTIE 209
DESTIN, FL 32541

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	YARBOROUGH, ROBERT
STREET ADDRESS	1860 MIDTOWN DR
CITY-ST-ZIP	COLUMBUS, GA 31906
TITLE	PD
NAME	TINDLE, TIM
STREET ADDRESS	376 BEN KING ROAD
CITY-ST-ZIP	FREEPORT, FL 32439
TITLE	STD
NAME	COPELAN, GEORGE
STREET ADDRESS	1860 MIDTOWN DR
CITY-ST-ZIP	COLUMBUS, GA 31906
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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 607, 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: Robert S Yarborough 6/15/06 7065639191
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #