

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 06, 2007 8:00 am
Secretary of State

08-06-2007 90031 036 ***158.75

DOCUMENT # P05000031334	
1. Entity Name DESTINATION REALTY GROUP, INC.	



40128213



Principal Place of Business 725 HARBOR BLVD. <i>212 Dolphin Estates Ct.</i> DESTIN, FL 32541 <i>Destin, FL 32541</i>	Mailing Address 725 HARBOR BLVD. DESTIN, FL 32541 <i>212 Dolphin Estates Ct.</i> <i>Destin, FL 32541</i>
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2. Principal Place of Business - No P.O. Box # <i>212 Dolphin Estates Ct.</i>	3. Mailing Address <i>212 Dolphin Estates Ct.</i>
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Suite, Apt. #, etc.	Suite, Apt. #, etc.
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City & State <i>Destin, FL</i>	City & State <i>Destin, FL</i>
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Zip <i>32541</i>	Country <i>USA</i>	Zip <i>32541</i>	Country <i>USA</i>
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07302007 Chg-P CR2E034 (12/06)

4. FEI Number <i>37-1508775</i>	Applied For <input type="checkbox"/>
	Not Applicable <input type="checkbox"/>

5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent MCNEESE, RICHARD S 36468 EMERALD COAST PARKWAY, SUITE 1201 DESTIN, FL 32541		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)	DATE
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FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD MARKEY, PATRICK J <i>725 HARBOR BLVD. 212 Dolphin Estates Ct.</i> DESTIN, FL 32541 <input type="checkbox"/> Delete	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"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	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"/> Delete	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 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: <i>Patrick J. Markey</i> PATRICK J. MARKEY PRESIDENT/OWNER 8-3-07	DATE	DAYTIME PHONE #
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