2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 29, 2008 08:00 AN Secretary of State

	ANNUAL	REPORT	<u> </u>	.	_		Sacrate	ary of Sta
DOCUMENT # P05000110954 1. Entity Name MEDLEY OF DESTIN, INC.							3661612	iry or Sta
833 KELL-AI	incipal Place of Business Mailing Address 83 KELL-AIRE DRIVE ESTIN, FL 32541 Mailing Address 833 KELL-AIRE DRIVE DESTIN, FL 32541				- 		IT) IITAI KARK ARKIA K	1102 81111 018 108 11 2001
DO NOT WRITE IN THIS SPACE				CE	03302008 4. FEI Numb 20-328		CR2E034	
6. Name and Address of Current Rogistered Agent POWELL, RICHARD H 92 EGLIN PARKWAY NE FORT WALTON BEACH, FL 32548				DO NOT WRITE IN THIS SPACE				
	named entity submits this statement for ions of registered agent. Signature, typed or printed name of registered agent as			d office or register	<u>.</u>	oth, in the State of Fl	orida I am fami	liar with, and accept
FILE NOW!!! FEE 18 \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Finant Trust Fund Contribution.					.00 May Be led to Fees			
10. ITILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AND D D/P SCHMIDT, LESLIE H 833 KELL-AIRE DRIVE DESTIN, F 32541	IRECTORS				05/22/08- NOT W	/RITE	4 150.00
NAME STREET ADDRESS CHY-ST-ZIP	*							•

12. Thereby certify that the information supplied with this filling 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.

G OFFICER OR DIRECTOR

SIGNATURE: SIGNATURE AND TYPED OR