## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000064562

Entity Name: MRC OF DESTIN INC

Title:

Name:

Address:

City-St-Zip:

DIR

SOILEAU, JOHN W

3229 HIGHWAY 17 N

() Delete

GREEN COVE SPRINGS, FL 32043 US

FILED Apr 29, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 12273 EMERALD COAST PARKWAY #202 MIRAMAR BEACH, FL 32550 **New Mailing Address: Current Mailing Address:** 3229 HIGHWAY 17 N GREEN COVE SPRINGS, FL 32043 US FEI Number: 20-4835725 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: JONES, D'LAINE 611 MALLORY DRIVE PANAMA CITY, FL 32405 US 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 Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition SOILEAU-HENNING, M. BROOKE Name: Name: 3229 HIGHWAY 17 N Address: Address: City-St-Zip: GREEN COVE SPRINGS, FL 32043 US City-St-Zip: Title: VΡ Title: () Delete () Change () Addition Name: JONES, D'LAINE Name: 611 MALLORY DRIVE Address: Address: PANAMA CITY, FL 32405 US City-St-Zip: City-St-Zip: Title: Title: SEC ( ) Delete () Change () Addition SOILEAU, NINA O Name: Name: 3229 HIGHWAY 17 N Address: Address: City-St-Zip: GREEN COVE SPRINGS, FL 32043 US City-St-Zip:

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: JOHN W. SOILEAU DIR 04/29/2007

() Change () Addition