

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000149864

FILED  
Feb 07, 2007  
Secretary of State

Entity Name: RESORT DESTINATIONS INC.

## Current Principal Place of Business:

6504 THOMAS DRIVE  
PANAMA CITY BEACH, FL 32408

## New Principal Place of Business:

## Current Mailing Address:

6504 THOMAS DRIVE  
PANAMA CITY BEACH, FL 32408

## New Mailing Address:

FEI Number: 20-8007233

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

## Name and Address of New Registered Agent:

REBECCA L TICE  
6504 THOMAS DR  
PANAMA CITY BEACH, FL 32408 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: REBECCA L TICE

02/07/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: TICE, REBECCA  
Address: 6504 THOMAS DRIVE  
City-St-Zip: PANAMA CITY BEACH, FL 32408

Title: VD ( ) Delete  
Name: STOKES, DONNA  
Address: 6504 THOMAS DRIVE  
City-St-Zip: PANAMA CITY BEACH, FL 32408

Title: S ( ) Delete  
Name: WINKLER, LOYCE  
Address: 6504 THOMAS DRIVE  
City-St-Zip: PANAMA CITY BEACH, FL 32408

Title: T ( ) Delete  
Name: TICE, HARRY  
Address: 6504 THOMAS DRIVE  
City-St-Zip: PANAMA CITY BEACH, FL 32408

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: REBECCA L TICE

PD

02/07/2007

Electronic Signature of Signing Officer or Director

Date