

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 27, 2007 08:00 AM
Secretary of State

DOCUMENT # P95000075701 1. Entity Name DESTIN MARINA SERVICES, INC.	
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Principal Place of Business 66 HWY. 98E DESTIN, FL 32541 US	Mailing Address 4100 LEGENDARY DR. STE. 200 DESTIN, FL 32541 US
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07252007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3334012	Applied For Not Applicable
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5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

LEGLER, MITCHELL W
300A WHARFSIDE WAY
JACKSONVILLE, FL 32207

**DO NOT WRITE
IN THIS SPACE**

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 _____ U000000770769
07/27/07-800006-009 550.00
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$550.00
Due by September 14, 2007**

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	D/P BOS, PETER H JR 4100 LEGENDARY DRIVE, SUITE 200 DESTIN, FL 32541
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	V CRAUL, BRUCE 4100 LEGENDARY DRIVE, SUITE 200 DESTIN, FL 32541
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	S PARKER, WENDY 4100 LEGENDARY DRIVE, SUITE 200 DESTIN, FL 32541
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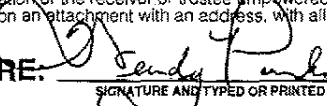
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V/T BUSFIELD, DAVID A 4100 LEGENDARY DRIVE, SUITE 200 DESTIN, FL 32541
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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**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:  Wendy Parker
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/25/07 (850) 337-8000
Date Daytime Phone #