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.

Principal Place of Business	Mailing Address
66 HWY. 98E DESTIN, FL 32541 US	4100 LEGENDARY DR. STE. 200 DESTIN, FL 32541 US

DO NOT WRITE IN THIS SPACE

07252007 No Chg-P CR2E034 (11/05)

4. FEI Number
59-3334012
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

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

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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.

U00000770769
07/27/07-80006-009 550.00

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

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	D/P
NAME	BOS, PETER H JR
STREET ADDRESS	4100 LEGENDARY DRIVE, SUITE 200
CITY-ST-ZIP	DESTIN, FL 32541
TITLE	V
NAME	CRAUL, BRUCE
STREET ADDRESS	4100 LEGENDARY DRIVE, SUITE 200
CITY-ST-ZIP	DESTIN, FL 32541
TITLE	S
NAME	PARKER, WENDY
STREET ADDRESS	4100 LEGENDARY DRIVE, SUITE 200
CITY-ST-ZIP	DESTIN, FL 32541
TITLE	V/T
NAME	BUSFIELD, DAVID A
STREET ADDRESS	4100 LEGENDARY DRIVE, SUITE 200
CITY-ST-ZIP	DESTIN, FL 32541
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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 7/25/07 (850)337-8000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #