2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED Apr 24, 2006 8:00 am Secretary of State

04-24-2006 90406 020 ***150 00

DOCUMENT # P9900003535 1. Entity Name DESTIN BUSINESS FORMS, INC.									()2	4-24-200 6	5 90406	020 ***1.	50.00
Principal Place of Business 4010 DANCING CLOUD # 387 DESTIN, FL 32541				Mailing Address P.O. BOX 86 DESTIN, FL 32540								11101 0 2700 14101 F	151 00 1 51 1 00 1
2. Principal Place of Business 307 Lan Rob Lane				3. Mailing Address				; ;	1				
Suite, Apt. #, etc.				Suite, Apt. #, etc.				0330200	6 C	hg-P	CR2E	E034 (11/05)	
City & State Destin, FL				City & State			4. FEI Number 59-3560715			i		No	oplied For ot Applicable
Zip 32541	Country USA 5. Name, and Address of Current			Zip	try						\$8.75 Add Fee Require		
		and Address of C	urrentikegis	tered Agent		Name		/. Name a	na Adan	igs Oliven	zegieterec	Agent	
WOLVERTON, EDDIE D 4010 DANCING CLOUD SUITE 387 DESTIN, FL 32540						Street Address (P.O. Box Number is Not Acceptable) 307 Lan Rob Lane							
						City Dest	in				F	L Zip Cod	e // 1
	tions of redie		٠, ٧-	ourpose of changing its		ed office or	register	ed agent, or		ne State of Fl	orida. I ar 4/19 DATE		
		FEE IS \$150.0 6 Fee will be \$		9. Election Campa Trust Fund Con		ncing	\$5 . Add	00 May Be ed to Fees					
10.	Гроте	OFFICER	S AND DIREC		11.			ADDITION	IS/CHAN	GES TO OFF	FICERS AN	ND DIRECTOR	
NAME STREET ADDRESS CITY-ST-ZIP	L	TON, EDDIĘ D ICING CLOUD, 9 FL 32541	STE. 387	□ Delete			30°	7 Lan stin,	Rob FL	Lane 3254	1	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				Delete								Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		1133		□ Delete								☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				□ Delete				V.				☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete		}						☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CHY-ST-ZIP				□ Delete								☐ Change	Addition
indicated of the cor	l on this repo rporation or tl	rt or supplemental r ne receiver or truste	eport is true a se empowere	iling does not qualify fo and accurate and that in d to execute this report I other like empowered	my signal as requi	ture shall ha	ave the s	same legal et	fect as if	made under	oath; that	I am an officer	or director

4/18/06

850-654-9154

Daytime Phone #