

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 01, 2002 8:00 am
Secretary of State

04-01-2002 90159 010 ***150.00

0056640 AV

DOCUMENT # P99000028076

1. Entity Name

DESTINATION, INC.

Principal Place of Business

Mailing Address

**40001 EMERALD COAST PKWY.
 DESTIN FL 32541**

**40001 EMERALD COAST PKWY.
 DESTIN FL 32541**

2. Principal Place of Business

3512 7th Avenue South

3. Mailing Address

3512 7th Avenue South

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Birmingham AL

City & State

Birmingham AL

Zip

35222

Country

U.S.

Zip

35222

Country

U.S.

4. FEI Number

59-3575974

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MATTHEWS, DANA C
 607 HWY. 98 EAST
 DESTIN FL 32541**

Name

Dawn E Larsh

Street Address (P.O. Box Number is Not Acceptable)

36468 Emerald Coast Pkwy Suite 2101

City

Destin

FL

Zip Code

32541

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

3/22/02

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☒

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PO** ☒ Delete
 NAME **JOHNSON, EDWARD**
 STREET ADDRESS **307 OSCEOLA CT.**
 CITY-ST-ZIP **NICEVILLE FL 32578**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **VD** ☐ Delete
 NAME **EVINS, LUKE**
 STREET ADDRESS **3512 7TH AVE**
 CITY-ST-ZIP **BIRMINGHAM AL 35222**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **SD** ☐ Delete
 NAME **MCCRORY, JOHN**
 STREET ADDRESS **3512 7TH AVE**
 CITY-ST-ZIP **BIRMINGHAM AL 35222**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **T** ☐ Delete
 NAME **LOBO, STEVE**
 STREET ADDRESS **3512 7TH AVE S.**
 CITY-ST-ZIP **BIRMINGHAM AL 35222**

TITLE ☒ Change ☐ Addition
 NAME **LEBO, STEVE**
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **P** ☒ Delete
 NAME **ADKINSON, MIKE**
 STREET ADDRESS **502 GREENWAY COVE**
 CITY-ST-ZIP **NICEVILLE FL 32578**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with another like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/19/2002

Date

005 251-2200

Daytime Phone #

CR2E034 (9/01)