

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000028099

FILED  
Apr 24, 2008  
Secretary of State

Entity Name: GULF DESTINATION, INC.

**Current Principal Place of Business:**

42 BUSINESS CENTRE DRIVE  
SUITE 401  
MIRAMAR BEACH, FL 32550 US

**New Principal Place of Business:**

**Current Mailing Address:**

42 BUSINESS CENTRE DRIVE  
SUITE 401  
MIRAMAR BEACH, FL 32550 US

**New Mailing Address:**

FEI Number: 59-3586028      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

COOK, JOSEPH M  
42 BUSINESS CENTRE DRIVE  
STE 303  
MIRAMAR BEACH, FL 32550 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P/D ( ) Delete  
Name: ADKINSON, MIKE  
Address: 502 GREENWAY COVE  
City-St-Zip: NICEVILLE, FL 32578

Title: VP/S ( ) Delete  
Name: DEVARONA, ENRIQUE J  
Address: 324 CYPRESS BREEZE BLVD  
City-St-Zip: SANTA ROSA BEACH, FL 32459 US

Title: VP/T ( ) Delete  
Name: ADKINSON, WAYNE  
Address: 557 WATERVIEW COVE  
City-St-Zip: FREEPORT, FL 32439 US

**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:

I hereby certify that the information supplied with this filing does not qualify 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: ENRIQUE DEVARONA

VP/S

04/24/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date