

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000038108

1. Entity Name

DESTIN WATERTOYS, INC.

FILED
Mar 31, 2000 8:00 am
Secretary of State

03-31-2000 90054 036 ***150.00

Principal Place of Business

Mailing Address

~~909 MAR WALT DRIVE STE. 1014~~
~~FORT WALTON BEACH FL 32547~~
302C Hwy 98E
DESTIN HARBOR DESTIN, FL 32541

~~909 MAR WALT DRIVE STE. 1014~~
~~FORT WALTON BEACH FL 32547~~

2. Principal Place of Business

302C Hwy 98E

3. Mailing Address

3928 MESA RD.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
DESTIN, FL

City & State
DESTIN, FL

4. FEI Number **59-3573861**

Applied For
Not Applicable

Zip **32541** Country **OKALOOSA**

Zip **32541** Country **OKALOOSA**

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

FOSTER, WILLIAM S
909 MAR WALT DRIVE STE. 1014
FORT WALTON BEACH FL 32547

Name

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

City

FL

Zip Code

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 *B. Patterson*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

3-24-00

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, 2000 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 ☒ **D PRESIDENT** ☐ Delete
NAME **PATTERSON, BILLY R**
STREET ADDRESS ~~PO BOX 688~~
CITY-ST-ZIP **TATUM NM 88207**

TITLE ☒ Change ☐ Addition
NAME **3928 MESA RD.**
STREET ADDRESS **DESTIN, FL 32541**
CITY-ST-ZIP

TITLE ☐ Delete
NAME **D SEC. / TREAS.**
NAME **PATTERSON, BEATRIZ E**
STREET ADDRESS ~~PO BOX 688~~
CITY-ST-ZIP **TATUM NM 88207**

TITLE ☒ Change ☐ Addition
NAME **3928 MESA RD.**
STREET ADDRESS **DESTIN, FL 32541**
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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 all other like empowered.

SIGNATURE: *B. Patterson*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/24/00
Date

Daytime Phone #

CR2E034 (9/99)