

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01842

Entity Name: DESTIN BEACH CLUB OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**1150 SCENIC HWY 98
DESTIN, FL 32541**Current Mailing Address:**1150 SCENIC HWY 98
DESTIN, FL 32541**FEI Number:** 59-2458838**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**BECKER & POLIAKOFF
BECKER & POLIAKOFF, PA
348 MIRACLE STRIP PKWY SW SUITE 7
FORT WALTON BEACH , FL 32548 US*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:** BECKER

03/20/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title ASST. TREASURER

Name BROSS, HAROLD

Address 37 ROSEDOWN

City-State-Zip: DESTREHAN LA

Title PRESIDENT, DIRECTOR

Name WILDER, BOB

Address 3443 DELL GLADE DR

City-State-Zip: MEMPHIS TN 38111

Title VP, DIRECTOR

Name CORNELISON, RODNEY

Address 2951 LEESBURG

City-State-Zip: GERMANTOWN TN 38138

Title DIRECTOR

Name PFEFFERKORN, BRENDA

Address 131 STAGECOACH LANE

City-State-Zip: JACKSON MO 63755

Title SECRETARY, DIRECTOR

Name TERRILE, STEPHEN

Address 2501 KINCLAVEN COURT

City-State-Zip: CEDAR PARK TX 78613

Title TREASURER

Name LEE, DANNY

Address 4409 CHILTON LANE

City-State-Zip: FLOWER MOUND TX 75028

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: BROSS , HAROLD

ASST TREASURER

03/20/2024

Electronic Signature of Signing Officer/Director Detail

Date