

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N93000001913

**FILED**  
**Feb 16, 2018**  
**Secretary of State**  
**CC1467006486**

**Entity Name:** DESTIN POINTE OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

480 GULF SHORE DRIVE  
DESTIN, FL 32541

**Current Mailing Address:**

970 GULF SHORE DRIVE  
DESTIN, FL 32541 US

**FEI Number:** 59-3181518

**Certificate of Status Desired:** No

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

PROGRESSIVE MANAGEMENT OF AMERICA INC  
970 GULF SHORE DRIVE  
DESTIN, FL 32541 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            BLUE, JOHN  
Address        970 GULF SHORE DRIVE  
City-State-Zip: DESTIN FL 32541

Title            DIRECTOR  
Name            BOLTON, CAROL  
Address        970 GULF SHORE DRIVE  
City-State-Zip: DESTIN FL 32541

Title            DIRECTOR  
Name            ANDRY, GILBERT  
Address        970 GULF SHORE DRIVE  
City-State-Zip: DESTIN FL 32541

Title            DIRECTOR  
Name            HERRLINGER, HARRY  
Address        970 GULF SHORE DRIVE  
City-State-Zip: DESTIN FL 32541

Title            VP  
Name            CHAPPELL, RICK  
Address        970 GULF SHORE DRIVE  
City-State-Zip: DESTIN FL 32541

Title            SECRETARY  
Name            BOLAND, TERI  
Address        970 GULF SHORE DRIVE  
City-State-Zip: DESTIN FL 32541

Title            DIRECTOR  
Name            ALISON, TOM  
Address        970 GULF SHORE DRIVE  
City-State-Zip: DESTIN FL 32541

Title            DIRECTOR  
Name            WILLIAMS, SANDRA  
Address        970 GULF SHORE DRIVE  
City-State-Zip: DESTIN FL 32541

*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:** JOHN BLUE

**PRESIDENT**

**02/16/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date