

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Aug 16, 2008
Secretary of State**

DOCUMENT# N07000012016

Entity Name: HUMANIFEST DESTINY, INC.

Current Principal Place of Business:

1095 MILITARY TRAIL
BOX 7711
JUPITER, FL 33468

New Principal Place of Business:

BOX 7711
1095 MILITARY TRAIL
JUPITER, FL 33468

Current Mailing Address:

1095 MILITARY TRAIL
BOX 7711
JUPITER, FL 33468

New Mailing Address:

BOX 7711
1095 MILITARY TRAIL
JUPITER, FL 33468

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

MAZA, ANTHONY L
139 RIVINIA DRIVE
JUPITER, FL 33468 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

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MAZA, ANTHONY L
Address: 139 RIVINIA DRIVE
City-St-Zip: JUPITER, FL 33468

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Delete
Name: KOVAC, MICHAEL J
Address: 410 LAKEWOOD DRIVE
City-St-Zip: OLDSMAR, FL 34677

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: STD () Delete
Name: MAZA, ANGELA K
Address: 139 RIVINIA DRIVE
City-St-Zip: JUPITER, FL 33468

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

SIGNATURE: ANTHONY L MAZA

PD

08/16/2008

Electronic Signature of Signing Officer or Director

Date