# 2016 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N0100000059

Entity Name: NEW DESTINY WORSHIP CENTER, INC.

S

Sep 18, 2016 Secretary of State CC8002635623

**FILED** 

#### **Current Principal Place of Business:**

2110 HERCULES AVE N. CLEARWATER, FL 33763

## **Current Mailing Address:**

2110 HERCULES AVE N. CLEARWATER, FL 33763

FEI Number: 59-3395033 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

BALLESTERO, CARL A 2301 EASTWOOD DR. CLEARWATER, FL 33765 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 D Title D

NameBALLESTERO, CARL ANameBALLESTERO, KIMBERLYAddress2301 EASTWOOD DR.Address2301 EASTWOOD DR.City-State-Zip:CLEARWATER FL 33765City-State-Zip:CLEARWATER FL 33765

Title O Title O

Name THOMPSON, CLARENCE M Name BALLESTERO, MARTYN SR

Address 7117 BROOKING WAY Address PO BOX 3038

City-State-Zip: MECHANICSVILLE VA 23111 City-State-Zip: SOUTH BEND IN 46619

Title OFFICER Title OFFICER

Name COLLINS, RASHIDI Name LEAMAN, JACK

Address 2110 HERCULES AVE N. Address 2110 HERCULES AVE N. City-State-Zip: CLEARWATER FL 33763 City-State-Zip: CLEARWATER FL 33763

Title OFFICER Title OTHER

Name THOMPSON, BUDDY Name MCGILL, EBONY YVONNE Address 2110 HERCULES AVE N.

City-State-Zip: CLEARWATER FL 33763 CIty-State-Zip: CLEARWATER FL 33763

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: EBONY MCGILL OTHER 09/18/2016