

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N13000003685

**FILED**  
**Aug 14, 2015**  
**Secretary of State**  
**CC2981037605**

**Entity Name:** DIVINE DESTINY MINISTRY INTERNATIONAL INC.

**Current Principal Place of Business:**

528 NW 87TH TERR  
CORAL SPRINGS, FL 33071

**Current Mailing Address:**

528 NW 87TH TERR.  
CORAL SPRINGS, FL 33071-7181 US

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: No**

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

JONES, CARMEN A  
528 NW 87TH TERR  
CORAL SPRINGS, FL 33071 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 PD  
Name KEELS, LORIE A  
Address 7815 NW 67TH AVENUE  
City-State-Zip: TAMARAC FL 33321

Title VPD  
Name JONES, CARMEN A  
Address 528 NW 87TH TERR  
City-State-Zip: CORAL SPRINGS FL 33071

Title AVPD  
Name CHAIN, DENISE  
Address 11643 W ATLANTIC BLVD  
City-State-Zip: CORAL SPRINGS FL 33071

Title SD  
Name JOAQUIN, CELENA  
Address 941 NW 33RD ST  
City-State-Zip: LAUDERHILL FL 33311

Title TD  
Name JONES, ELAINE  
Address 8161 N UNIVERSITY DR, APT #21  
City-State-Zip: TAMARAC FL 33321

*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: CARMEN A. JONES**

**REGISTERED AGENT**

**08/14/2015**

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

\_\_\_\_\_  
Date