

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000004002

Entity Name: DESTINY INTERNATIONAL /INDIA GOSPEL MISSION, USA, INC.**Current Principal Place of Business:**182 NORTHWOOD LANE
CRAWFORDVILLE, FL 32727**Current Mailing Address:**P.O. BOX 20427
TALLAHASSEE, FL 32316-0427 US**FEI Number: 59-3701676****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**PECK, EUGENE L
182 NORTHWOOD LANE
CRAWFORDVILLE, FL 32327 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	PECK, EUGENE L
Address	182 NORTHWOOD LANE
City-State-Zip:	CRAWFORDVILLE FL 32727

Title	VPD
Name	BOYD, WHIT
Address	12617 ASHVILLE HWY
City-State-Zip:	GREENVILLE FL 32331

Title	T
Name	PECK, RENEE
Address	182 NORTHWOOD LANE
City-State-Zip:	CRAWFORDVILLE FL 32727

Title	SD
Name	VINSON, RAYMOND
Address	485 MILLWOOD DRIVE
City-State-Zip:	HAVANA FL 32333

Title	D
Name	HUTCHER, JACOB
Address	210 BEASLEY MINE RD
City-State-Zip:	FRANKLIN NC 28734

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: RENEE PECK**TREASURER****06/16/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date