

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N21000001906

**Entity Name:** DESTINATION LIFE INC.

**Current Principal Place of Business:**

1798 VETERANS DR  
KINDRED, FL 34744

**Current Mailing Address:**

1798 VETERANS DR  
KINDRED, FL 34744 US

**FEI Number: 86-2239106**

**Certificate of Status Desired: Yes**

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

COLEY, DORIAN  
1798 VETERANS DR  
KINDRED, FL 34744 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 P  
Name COLEY, DORIAN  
Address 1798 VETERANS DR  
City-State-Zip: KINDRED FL 34744

Title VP  
Name COLEY, MIGUELINA  
Address 1798 VETERANS DRIVE  
City-State-Zip: KINDRED FL 34744

Title VP  
Name COLEY, REINA  
Address 1798 VETERANS DRIVE  
City-State-Zip: KINDRED FL 34744

Title VP  
Name COLEY, ISABELLA  
Address 1798 VETERANS DRIVE  
City-State-Zip: KINDRED FL 34744

Title VP  
Name COLEY, GIULIANA  
Address 1798 VETERANS DR  
City-State-Zip: KINDRED FL 34744

Title CFO  
Name CEBALLOS, BRAULIO  
Address 1798 VETERANS DR  
City-State-Zip: KINDRED FL 34744

*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: DORIAN COLEY**

**PRESIDENT**

**03/08/2023**

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

\_\_\_\_\_  
Date