

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

2260-793-22

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 638459 (8)

1. Corporation Name

DESTINY CORPORATION

Principal Place of Business

603 MAIN STREET
P. O. BOX 1100
WINDERMERE FL 34786-1100
US

Mailing Address

603 MAIN STREET
P. O. BOX 1100
WINDERMERE FL 34786-1100
US



2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

09/28/1979

3a. Date of Last Report

03/22/1995

4. FEI Number

59-1947258

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

DIZNEY, DONALD
603 MAIN STREET
WINDERMERE 34786

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and individual agent

(Date) Registered Agent signature required when appointing

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DCS
DIZNEY, DONALD
603 MAIN ST
WINDERMERE FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

PSD
ENGLISH, JAMES E.
603 MAIN ST
WINDERMERE FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

V
BARKMAN, KEVIN
603 MAIN ST
WINDERMERE FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

V
DIZNEY, DAVID
603 MAIN ST
WINDERMERE FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

V
DIZNEY, MICHAEL
603 MAIN ST
WINDERMERE FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

T
DELEHUNT, JANINE S
603 MAIN ST
WINDERMERE FL

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

DCs

☐ Change

☐ Addition

1.2 NAME

Dizney, Donald R.

1.3 STREET ADDRESS

603 Main St., Windermere, FL

1.4 CITY-ST-ZIP

2.1 TITLE

PSD

☐ Change

☐ Addition

2.2 NAME

English, James E.

2.3 STREET ADDRESS

603 Main St., Windermere, FL

2.4 CITY-ST-ZIP

3.1 TITLE

VS

☒ Change

☐ Addition

3.2 NAME

Barkman, Kevin

3.3 STREET ADDRESS

603 Main St., Windermere, FL

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change

☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change

☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☒ Change

☐ Addition

Delehunt, Janine S.

603 Main St., Windermere, FL

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Janine S. Delehunt
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/18/96

407) 876-2200

Day

Daytime Phone

CR2E034 (12/95)