FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT . CORPORATION **ANNUAL REPORT** 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 638459

(8)

DESTINY CORPORATION

FILED May 19 1998 8:00am Secretary of State



Principal Place of Business Mailing Address				<u> </u>	I TORKIO OLION KINOLININI OLIONI DIKIN KRIL	ALBIS BIDS BIRIT BERN AN	}
803 MAIN STREET P. O. BOX 1100 WINDERMERE FL 34786-1100 US		603 MAIN STREET P. O. BOX 1100 WINDERMERE FL 34786-1100 US		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified			
US		00			09/28/1979		
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Į.	Applied For
26		26			59-1947258	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	27		5. Certificate of Status Desired		Additional Required
City & State	28				6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees		
Zip	Country	Zip	Count	ту	8. This corporation owes or has paid the current year Intangible		
24	25	29	30]		Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent		
517	Name and Address of Curre Name and Address of Curre	nt Hegistered Agent	8	Name	10. Name and Addiess of New Neg	istered where	
DIZNEY, DONALD 603 MAIN STREET			L				
	NDERMERE 34786		8	2 Street Add	lress (P.O. Box Number is Not Acceptabl	⊕)	
4411	IDENMERIE 37700		8	3			
			<u> </u>	4 000		as 7iv	Code
			8	4 City		FL 85 Zip	, 0000
office or r agent. La	to the provisions of Sections 607.05 registered agent, or both, in the Stat im familiar with, and accept the oblig	02 and 607.1508, Florida Statut e of Florida. Such ch ange was a gations of, Section 607.0505, Flo	es, the abo authorized i orida Statut	ve-named corpora by the corpora es.	poration submits this statement for the pi tion's board of directors. I hereby accep	urpose of changing tithe appointment a	its registered is registered
SIGNATURE	Signature, typind or printed name of repertered ag	ent and title diapplicable (NOT	E: Registered A	gent signature requ	red when reinstaling)	DATE	
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE		
TITLE	DCAS	[] DELETE	1.1 TITLE			Change	Addition
NAME	DIZNEY, DONALD						
STREET ADDRESS	LABORDA POP FI			ET ADDRESS			1
CITY-ST-ZIP	PD PD	DELETE	1.4 CHY 2.1 YHUE			Change	Addition
TITLE	ENGLISH, JAMES E.		2.1 11100 2.2 NAM	Į.			
NAME Street Aodress	603 MAIN ST			E1 ADDRESS			
CITY-SI-ZIP	WINDERMERE FL		2.4 CITY	1			
TITLE	VS	DELETE	3.1 TITLE			Change	Addition
NAME	BARKMAN, KEVIN		3.2 NAM	E			
STREET ADDRESS	603 MAIN ST		3.3 STRE	E1 ADDRESS			
CITY-ST-ZiP	WINDERMERE FL		3 4. CITY	-ST-ZIP			
TITLE	V	DELETE	4.1 TOTAL			Change	e
NAME	DIZNEY, DAVID		4. 2 NAN	IE			
STREET ADDRESS	603 MAIN ST		4 3 STRE	ET ADDRESS			
CITY-ST-ZIP	WINDERMERE FL			- S1 - ZIP			Addition
TITLE	DELETIMENT CAMBLE A	DELETE	5.1 TITLE	į.		☐ Change	Addition
NAME	DELEHUNT, JANINE S.		5.2 NAM				
STREET ADDRESS	603 MAIN ST WINERMERE FL			ET ADDRESS			
CITY-ST-ZIP	THINCHMENE PL	DELETE		- ST - ZIP		Change	Addition
TITLE			6.1 TITLE	1		onange	reduced
NAME			6.2 NAM				
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP	<u> </u>		6.4 CITY	-ST-2IP	0 4 40 07/0V() Flands Continue 1	£	La lafa-mation

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

Charles Quellan