2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2008
Secretary of State

DOCUMENT# N00000007063

Entity Name: DESTINY FULFILLED INTERNATIONAL MINISTRIES, INC.

Current Principal Place of Business:

3088 LAYLA STREET
TALLAHASSEE, FL 32303

New Principal Place of Business:

3166 LAYLA STREET
TALLAHASSEE, FL 32303

Current Mailing Address:

P O BOX 180687
TALLAHASSEE, FL 32318

New Mailing Address:

FEI Number: 59-3684020 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ABBOTT, KRISTA L
3088 LAYLA STREET
TALLAHASSEE, FL 32303 US

Name and Address of New Registered Agent:

ABBOTT, KRISTA L
3166 LAYLA STREET
TALLAHASSEE, FL 32303 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: KRISTA L. ABBOTT 04/27/2008
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: ABBOTT, KRISTA L REV
Address: 3088 LAYLA STREET
City-St-Zip: TALLAHASSEE, FL 32303

Title: D ( ) Delete
Name: ABBOTT, JOANNA R
Address: 3088 LAYLA STREET
City-St-Zip: TALLAHASSEE, FL 32303

Title: D ( ) Delete
Name: ABBOTT, SONNY B
Address: 3088 LAYLA STREET
City-St-Zip: TALLAHASSEE, FL 32303

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: ABBOTT, KRISTA L REV
Address: 3166 LAYLA STREET
City-St-Zip: TALLAHASSEE, FL 32303

Title: D (X) Change ( ) Addition
Name: ABBOTT, JOANNA R
Address: 3166 LAYLA STREET
City-St-Zip: TALLAHASSEE, FL 32303

Title: D (X) Change ( ) Addition
Name: ABBOTT, SONNY B
Address: 3166 LAYLA STREET
City-St-Zip: TALLAHASSEE, FL 32303

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: KRISTA L. ABBOTT PD 04/27/2008
Electronic Signature of Signing Officer or Director Date