## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01000005257

Apr 25, 2006 Secretary of State

**FILED** 

Entity Name: DESTINY PEOPLE WORSHIP CENTER, INC.

Current Principal Place of Business: New Principal Place of Business:

P O BOX 582 7445 S. HWY 121

GLEN ST MARY, FL 32040582 MACCLENNY, FL 32063

Current Mailing Address: New Mailing Address:

P O BOX 582 7445 S. HWY 121

GLEN ST MARY, FL 32040582 MACCLENNY, FL 32063

FEI Number: 59-3740307 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

RAGAN, M DAVID JR
711 SHORTPUTT DR.
MACCLENNY, FL 32063 US

RAGAN, M DAVID JR
1325 COPPER OAKS CT.
MACCLENNY, FL 32063 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: 04/25/2006

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: D () Delete Title: D (X) Change () Addition

 Name:
 RAGAN, M DAVID JR
 Name:
 RAGAN, M DAVID JR

 Address:
 P O BOX 582
 Address:
 1325 COPPER OAKS CT.

 City-St-Zip:
 GLEN ST MARY, FL 32040582
 City-St-Zip:
 MACCLENNY, FL 32063

Fitle: D () Delete Title: D (X) Change () Addit

Title: D () Delete Title: D (X) Change () Addition
Name: CARROLL, ROBERT J Name: CARROLL, ROBERT J
Address: 2936 SYRACUSE AVE Address: 1710 CHAT HOLLEY RD.

City-St-Zip: PANAMA CITY, FL 32405 City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: D ( ) Delete Title: D (X) Change ( ) Addition Name: RAGAN, JENNIFER C Name: RAGAN, JENNIFER C

Address: P O BOX 582 Address: 1325 COPPER OAKS CT.
City-St-Zip: GLEN ST MARY, FL 32040582 City-St-Zip: MACCLENNY, FL 32063

I hereby certify that the information supplied with this filing does not qualify for the 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: M. DAVID RAGAN JR. PRES 04/25/2006