

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002505

FILED  
May 11, 2010  
Secretary of State

**Entity Name:** DESTINED TO WIN FAMILY WORSHIP CENTER INC.

**Current Principal Place of Business:**

2736 BOONE STREET  
COLUMBIA, SC 29204

**New Principal Place of Business:**

3911 W BELTLINE BLVD  
COLUMBIA, SC 29204

**Current Mailing Address:**

2736 BOONE STREET  
COLUMBIA, SC 29204

**New Mailing Address:**

PO BOX 149  
W, SC 29180

**FEI Number:** 75-3041939      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

DEL ROCIO FLOREZ, MARIA  
1161 SW 118TH TERRACE  
DAVIE, FL 33325 US

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

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

**OFFICERS AND DIRECTORS:**

**Title:** D  
**Name:** GWILLIAM, ANGELA  
**Address:** PO BOX 149  
**City-St-Zip:** WINNSBORO, SC 29180

**Title:** D  
**Name:** GWILLIAM, WAYNE  
**Address:** PO BOX 149  
**City-St-Zip:** WINNSBORO, FL 29180

**Title:** D  
**Name:** MICHELS, ANGELLA  
**Address:** 15 WINDSOR COURT  
**City-St-Zip:** POUGHKEEPSIE, NY 12601

**Title:** D  
**Name:** SUTTON, KIM D  
**Address:** 250 STABLER HILL RD  
**City-St-Zip:** SWANSEA, SC 29160

**Title:** D  
**Name:** CONOVER, KIMBERLY S  
**Address:** 2736 BOONE STREET  
**City-St-Zip:** COLUMBIA, SC 29204

**Title:** D  
**Name:** DEL ROCIO FLOREZ, MARIA  
**Address:** 1161 SW 118TH TERRACE  
**City-St-Zip:** DAVIE, FL 33325

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: ANGELA GWILLIAM

PRES

05/11/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date