

ND30000000653

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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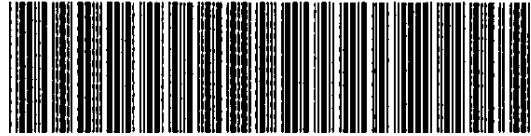
(Business Entity Name)

(Document Number)

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** New Destiny International Ministries  
Name of Corporation

**DOCUMENT NUMBER:** N03000000653

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Erma I. Bennett  
Name of Contact Person

New Destiny International Ministries  
Firm/Company

5074 Coconut Creek Parkway  
Address

Margate, FL 33063-3942  
City/State and Zip Code

New\_Destiny@bellsouth.net  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Erma I. Bennett at ( 786 ) 385-3530  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 9, 2010

ERMA I. BENNETT  
NEW DESTINY INTERNATIONAL MINISTRIES  
5074 COCONUT CREEK PARKWAY  
MARGATE, FL 33063-3942

SUBJECT: NEW DESTINY INTERNATIONAL MINISTRIES, INCORPORATED  
Ref. Number: N03000000653

We have received your document for NEW DESTINY INTERNATIONAL MINISTRIES, INCORPORATED and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton  
Regulatory Specialist II

Letter Number: 810A00016733

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: New Destiny International Ministries, Incorporated
2. The principal office address: 5074 Coconut Creek Parkway, Margate, FL 33063-3942
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 1/27/2003 Document number: N03000000653

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Woodrow Bennett  
5060 Coconut Creek Parkway, Suite 5072-5074  
Margate, FL 33063

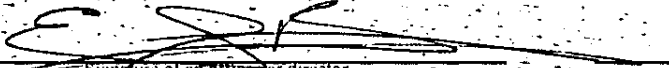
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Woodrow Bennett  
9545 New Waterford Cove  
Delray Beach, FL 33446  
able


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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

 ERMA I BENNETT - VPD.  
Signature of an officer or director Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

 July 6, 2010  
Signature of Registered Agent Date

If signing on behalf of an entity:

Woodrow Bennett  
Typed or Printed Name

\*\*\* FILING FEE: \$35.00 \*\*\*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314