2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2008
Secretary of State

DOCUMENT# N03000004641

Entity Name: DESTINY LIFE CHURCH, INC.

Current Principal Place of Business:

475 S. JOHN RODES BLVD #4
MELBOURNE, FL 32935

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2072
MELBOURNE, FL 32901

New Mailing Address:

FEI Number: 05-0575715 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GREENE, RONALD D
430 NW AVOCADO RD.
PALM BAY, FL 32907 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:	P	( ) Delete
Name:	GREENE, RONALD D	
Address:	430 NW AVOCADO RD.	
City-St-Zip:	PALM BAY, FL 32907	
Title:	V	( ) Delete
Name:	GREENE, TANYA A	
Address:	430 NW AVOCADO RD.	
City-St-Zip:	PALM BAY, FL 32907	
Title:	S	( ) Delete
Name:	BROWN, EMANUEL	
Address:	2965 PARK VILLAGE WAY	
City-St-Zip:	MELBOURNE, FL 32935	
Title:	T	( ) Delete
Name:	WILLIAMS, CAMELIA	
Address:	4775 ELENA WAY	
City-St-Zip:	MELBOURNE, FL 32934	
Title:	D	( ) Delete
Name:	ROBERSON, DARIN	
Address:	697 BRYANT RD. SW	
City-St-Zip:	PALM BAY, FL 32908	
Title:	D	( ) Delete
Name:	GEOFFREY, ALPIN D	
Address:	1814 MACKLIN ST N W	
City-St-Zip:	PALM BAY, FL 32907	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

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: RONALD D. GREENE P 04/29/2008

Electronic Signature of Signing Officer or Director — Date