

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007569

FILED
Apr 27, 2009
Secretary of State

Entity Name: DISCOVERIES OF DESTINY, INC

Current Principal Place of Business:

4911 CAMUS STREET
SARASOTA, FL 34232 US

New Principal Place of Business:

Current Mailing Address:

4911 CAMUS STREET
SARASOTA, FL 34232 US

New Mailing Address:

FEI Number: 20-2475708

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GRUSH, J. D.
4911 CAMUS STREET
SARASOTA, FL 34232 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: PRES () Delete
Name: GRUSH, J. D.
Address: 4911 CAMUS STREET
City-St-Zip: SARASOTA, FL 34232 US

Title: SEC () Delete
Name: GRUSH, JUDY L
Address: 4911 CAMUS STREET
City-St-Zip: SARASOTA, FL 34232 US

Title: D () Delete
Name: DIRKS, MARILYN K
Address: 4419 PIKE AVENUE
City-St-Zip: SARASOTA, FL 34233

Title: D () Delete
Name: RAMOS, JESSIE J
Address: 3711 COLORADO ST
City-St-Zip: SARASOTA, FL 34232

Title: D () Delete
Name: SHEFFERD, LARRY E
Address: 6063 ST ALBAN RD
City-St-Zip: PENSACOLA, FL 32503

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:

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: J.D. GRUSH

PRES

04/27/2009

Electronic Signature of Signing Officer or Director

Date