

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009121

FILED
Jul 19, 2007
Secretary of State

Entity Name: NEW DESTINY COMMUNITY CHURCH INCORPORATED

Current Principal Place of Business:

766 LARIMORE RD
PAHOKEE, FL 33476

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 554
PAHOKEE, FL 33476

New Mailing Address:

FEI Number: 41-2142803 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
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:

HINES, PAMELA Y
5810 SPANISH RIVER ROAD
FT PIERCE, FL 34951 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: PD () Delete
Name: HINES, JARED E
Address: 5810 SPANISH RIVER ROAD
City-St-Zip: FORT PIERCE, FL 34951

Title: PD () Delete
Name: HINES, PAMELA Y
Address: 5810 SPANISH RIVER ROAD
City-St-Zip: FORT PIERCE, FL 34951

Title: S () Delete
Name: CALHOUN, DANA
Address: 7631 NORTHWEST 4 AVENUE
City-St-Zip: MIAMI, FL 33150

Title: DEAC () Delete
Name: HINES, CHARLES
Address: 7631 NORTHWEST 4 AVENUE
City-St-Zip: MIAMI, FL 33150

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:

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: DANA CALHOUN

S

07/19/2007

Electronic Signature of Signing Officer or Director

Date