2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000000145

FILED Jan 19, 2009 Secretary of State

Entity Na	me: NEW DESTINY ASSEMBLY OF GO	OD INC		
Littly Na	IIIIE. NEW DESTINI ASSEMBLI OF GO			
		<i>3</i> B 11 1 C.		
Current F	Principal Place of Business:	New Principal Place	of Business:	
	HWY. 17-92 N. ORT, FL 33896 US			
Current N	Mailing Address:	New Mailing Address	:	
P. O. BOX LOUGHM	K 316 IAN, FL 33858 US			
FEI Numbei	r: 59-3792992 FEI Number Applied For () FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:		t: Name and Address o	Name and Address of New Registered Agent:	
	CTOR M HWY. 17-92 N. ORT, FL 33896 US			
The above				
	e named entity submits this statement for te of Florida.	the purpose of changing its registered	office or registered agent, or both,	
in the Stat	te of Florida.	the purpose of changing its registered	office or registered agent, or both,	
in the Stat	te of Florida.		office or registered agent, or both, Date	
in the Stat SIGNATU	te of Florida. Î	d Agent		
in the Stat SIGNATU	te of Florida. JRE: Electronic Signature of Registered RS AND DIRECTORS: DCEO () Delete VEGA, VICTOR M 538 SADDLE RIDGE DR.	d Agent	Date	
in the Stat SIGNATU OFFICER Title: Name: Address:	te of Florida. JRE: Electronic Signature of Registered RS AND DIRECTORS: DCEO () Delete VEGA, VICTOR M 538 SADDLE RIDGE DR.	d Agent ADDITIONS/CHANGE Title: Name: Address:	Date S TO OFFICERS AND DIRECTORS	
in the Stat SIGNATU OFFICER Title: Name: Address: City-St-Zip: Title: Name: Address:	te of Florida. JRE: Electronic Signature of Registered RS AND DIRECTORS: DCEO () Delete VEGA, VICTOR M 538 SADDLE RIDGE DR. DAVENPORT, FL 33896 US TD () Delete BROWN, RICHARD 625 GRANDIN DR.	d Agent ADDITIONS/CHANGE Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	Date S TO OFFICERS AND DIRECTOR () Change () Addition	

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: RICHARD W BROWN TD 01/19/2009