2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2009
Secretary of State

DOCUMENT# N05000003483

Entity Name: DESTINY HOUSING INITIATIVE CORPORATION

Current Principal Place of Business:

4808 MANDURIA STREET
ORLANDO, FL 32819

New Principal Place of Business:

Current Mailing Address:

4808 MANDURIA STREET
ORLANDO, FL 32819

New Mailing Address:

FEI Number: 20-2549634 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GLENN, JOSEPH
4808 MANDURIA STREET
ORLANDO, FL 32819 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: D ( ) Delete
Name: THERESA MADISON,
Address: 4808 MANDURIA STREET
City-St-Zip: ORLANDO, FL 32819 US

Title: VP ( ) Delete
Name: GREENIDGE, WENDY
Address: 3614 ALAFAYA COMMONS
City-St-Zip: ORLANDO, FL 32826 US

Title: SEC ( ) Delete
Name: LOCKHART, ALICIA
Address: 4808 MANDURIA STREET
City-St-Zip: ORLANDO, FL 32819 US

Title: T ( ) Delete
Name: CRUZRAMOS, ESTABAN
Address: 700 SOUTHWEST 62ND BLOCK
City-St-Zip: GAINESVILLE, FL 32697 US

Title: T ( ) Delete
Name: FRANCIS, PAUL
Address: 500 FORD DRIVE
City-St-Zip: ALTAMONT SPRINGS, FL 32701 US

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: THERESA MADISON P 03/24/2009

Electronic Signature of Signing Officer or Director — Date