2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2009
Secretary of State

DOCUMENT# N06000008383

Entity Name: NEW DESTINY CHILDRENS HOME, INC.

Current Principal Place of Business:

6451 HARLOW BLVD
JACKSONVILLE, FL 32210

New Principal Place of Business:

Current Mailing Address:

7579 ORTEGA BLUFF PKWY
JACKSONVILLE, FL 32244

New Mailing Address:

FEI Number: 26-0635461 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

YATES, DEVOYE K
6451 HARLOW BLVD
JACKSONVILLE, FL 32210 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:	YATES, DEVOYE K	
Address:	7579 ORTEGA BLUFF PKWY	
City-St-Zip:	JACKSONVILLE, FL 32244	
Title:	VPD	( ) Delete
Name:	YATES, SABRINA M	
Address:	7579 ORTEGA BLUFF PKWY	
City-St-Zip:	JACKSONVILLE, FL 32244	
Title:	TD	( ) Delete
Name:	WADE, CATHY	
Address:	6648 AUTUMN BLUFF LN	
City-St-Zip:	JACKSONVILLE, FL 32244	
Title:	SD	( ) Delete
Name:	SIMMONS, GWENDOLYN	
Address:	2020 OAK GLEN RD	
City-St-Zip:	JACKSONVILLE, FL 32218	
Title:	D	( ) Delete
Name:	MYERS, CAROLYN E	
Address:	7579 ORTEGA BLUFF PKWY	
City-St-Zip:	JACKSONVILLE, FL 32244	

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: DEVOYE K. YATES PD 01/07/2009

Electronic Signature of Signing Officer or Director — Date