

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000010306

FILED  
Apr 29, 2009  
Secretary of State

**Entity Name:** DESTINY MINISTRIES OF SOUTHWEST FLORIDA, INC.

**Current Principal Place of Business:**

1510 SE 46TH. LN.  
CAPE CORAL, FL 33904

**New Principal Place of Business:**

**Current Mailing Address:**

1510 SE 46TH. LN.  
CAPE CORAL, FL 33904

**New Mailing Address:**

**FEI Number:** 51-0604091

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HINES, REBECCA G REV.  
2708 N. W. 22 ST.  
CAPE CORAL, FL 33993 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: P ( ) Delete  
Name: HINES, REBECCA G REV.  
Address: 2708 N. W. 22 ST.  
City-St-Zip: CAPE CORAL, FL 33993

Title: V ( ) Delete  
Name: GRADY, ELLA  
Address: 6985 EDGEWATER CIRCLE  
City-St-Zip: FT. MYERS, FL 33919

Title: T ( ) Delete  
Name: MORICI, GAYLE  
Address: 7370 COLLEGE PKWY  
City-St-Zip: FT. MYERS, FL 33907

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S (X) Change ( ) Addition  
Name: GRADY, ELLA  
Address: 6985 EDGEWATER CIRCLE  
City-St-Zip: FT. MYERS, FL 33919

Title: V P (X) Change ( ) Addition  
Name: HINES, JACK  
Address: 2708 NW 22 ST.  
City-St-Zip: CAPE CORAL, FL 33993

Title: T ( ) Change (X) Addition  
Name: BAKER, MICHELLE  
Address: 11983 TAMiami TRAIL N.  
City-St-Zip: NAPLES, FL 34110

Title: V P ( ) Change (X) Addition  
Name: WHALEN, JOE  
Address: 1402 E. FOURTH ST.  
City-St-Zip: LEHIGH ACRES, FL 33936

Title: V P ( ) Change (X) Addition  
Name: WHALEN, JENNIFER  
Address: 1402 E. FOURTH ST.  
City-St-Zip: LEHIGH ACRES, FL 33936

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: REV. REBECCA G. HINES

P

04/29/2009

Electronic Signature of Signing Officer or Director

Date