

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000005772

FILED
Mar 04, 2009
Secretary of State

Entity Name: ARK OF THE COVENANT DESTINY CENTER, INC.

Current Principal Place of Business:

2630 CAHILL WAY
LAKE WAY, FL 32746

New Principal Place of Business:

127 CASA MARINA PLACE
SANFORD, FL 32771

Current Mailing Address:

2630 CAHILL WAY
LAKE WAY, FL 32746

New Mailing Address:

127 CASA MARINA PLACE
SANFORD, FL 32771

FEI Number: 75-3239053

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALEXANDER, BRYSON
2630 CAHILL WAY
LAKE WAY, FL 32746 US

Name and Address of New Registered Agent:

ALEXANDER, BRYSON
127 CASA MARINA PLACE
SANFORD, FL 32771 US

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:

03/04/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CHRM () Delete
Name: WILLIAMS, CICELY
Address: 2630 CAHILL WAY
City-St-Zip: LAKE WAY, FL 32746

Title: VCHR () Delete
Name: ALEXANDER, MICHELLE
Address: 2630 CAHILL WAY
City-St-Zip: LAKE WAY, FL 32746

Title: S () Delete
Name: MILLER, ANGELIA
Address: 417 SPRING VIEW DRIVE
City-St-Zip: SANFORD, FL 32773

Title: T () Delete
Name: JAMES, ANTHONY
Address: 2692 ALAMOSA DRIVE
City-St-Zip: LAKE MARY, FL 32746

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CHRM (X) Change () Addition
Name: DRAYTON, VINCE
Address: 2692 ALA MOSA DRIVE
City-St-Zip: LAKE MARY, FL 32746

Title: VCHR (X) Change () Addition
Name: ALEXANDER, MICHELLE
Address: 127 CASA MARINA PLACE
City-St-Zip: SANFORD, FL 327423771

Title: S (X) Change () Addition
Name: ROSARIO, ALEXA
Address: 7208 WYNDAM CREST PLACE
City-St-Zip: SANFORD, FL 32771

Title: T (X) Change () Addition
Name: JAMES, ANTHONY
Address: 1417 STILLWATER AVE
City-St-Zip: DELTONA, FL 32725

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: ALEXANDER BRYSON

PRES

03/04/2009

Electronic Signature of Signing Officer or Director

Date