

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000005772

**FILED**  
**Jan 06, 2010**  
**Secretary of State**

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

**Current Principal Place of Business:**

127 CASA MARINA PLACE  
SANFORD, FL 32771

**New Principal Place of Business:**

**Current Mailing Address:**

127 CASA MARINA PLACE  
SANFORD, FL 32771

**New Mailing Address:**

**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  
127 CASA MARINA PLACE  
SANFORD, FL 32771 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:** CHRM  
**Name:** DRAYTON, VINCE  
**Address:** 2692 ALA MOSA DRIVE  
**City-St-Zip:** LAKE MARY, FL 32746

**Title:** VCHR  
**Name:** ALEXANDER, MICHELLE  
**Address:** 127 CASA MARINA PLACE  
**City-St-Zip:** SANFORD, FL 327423771

**Title:** S  
**Name:** ROSARIO, ALEXA  
**Address:** 7208 WYNDAM CREST PLACE  
**City-St-Zip:** SANFORD, FL 32771

**Title:** T  
**Name:** JAMES, ANTHONY  
**Address:** 1417 STILLWATER AVE  
**City-St-Zip:** DELTONA,, FL 32725

I hereby 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 all other like empowered.

**SIGNATURE:** BRYSON ALEXANDER

PRES

01/06/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date