2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 22, 2009
Secretary of State

DOCUMENT# N08000007667

Entity Name: DESTINY FULFILLED OUTREACH MINISTRIES INC.

Current Principal Place of Business:

5760 MAYO ST
HOLLYWOOD, FL 33023

New Principal Place of Business:

Current Mailing Address:

5760 MAYO ST
HOLLYWOOD, FL 33023

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WALKER, SCHMEKA T
5760 MAYO ST
HOLLYWOOD, FL 33023 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: WALKER, SCHMEKA T
Address: 5760 MAYO ST
City-St-Zip: HOLLYWOOD, FL 33023 US

Title: VP ( ) Delete
Name: TISBY, LUCY MAE
Address: 2201 SW 54TH AVE
City-St-Zip: HOLLYWOOD, FL 33023 US

Title: O ( ) Delete
Name: KING, JEAN EMMA
Address: 4419 SW 28TH ST
City-St-Zip: HOLLYWOOD, FL 33023 US

Title: O ( ) Delete
Name: EVANS, BERNICE
Address: 2242 RODMAN ST
City-St-Zip: HOLLYWOOD, FL 33020 US

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

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: O ( ) Change (X) Addition
Name: TISBY, CANDICE T
Address: 5760 MAYO ST
City-St-Zip: HOLLYWOOD, FL 33023 US

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: LUCY MAE TISBY VP 03/22/2009
Electronic Signature of Signing Officer or Director — Date