

2010 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

10 APR 30 AM 8:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N11000007352	
1. Entity Name <i>Destiny International / India Gospel Mission USA Inc.</i>	
Principal Place of Business	Mailing Address



700180069437
05/03/10--01016--021 **150.00

2. Principal Place of Business - No P.O. Box # <i>1510 Sunset Lane</i>	3. Mailing Address <i>PO Box 20427</i>
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State <i>Tallahassee FL</i>	City & State <i>Tallahassee, FL</i>
Zip <i>32303</i>	Zip <i>32306</i>
Country <i>USA</i>	Country <i>USA</i>

4. FEI Number <i>59-3701676</i>	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent <i>Peck, Eugene L 1510 Sunset Lane Tallahassee, FL 32303</i>

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signatures: typewritten or printed name of registered agent and state if applicable

(NOTE: Registered Agent signature required when resigning)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2010 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
<i>Eugene L Peck 1510 Sunset Lane Tallahassee, FL 32303</i>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
<i>UP Whit Boyd 12617 Ashville Hwy Greenville FL 32331</i>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
<i>S Molly Rudolph 440 10th Ave N St Petersburg FL 33701</i>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
<i>T Renee Peck 1510 Sunset Lane Tallahassee, FL 32303</i>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
<i>05/14</i>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Renee Peck 4-30-10 850-350-3725

Xroad 2 @ Hptma:1. Com