

# FILE NOW: FILING FEE IS \$61.25

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|---|---|--|
| <b>NONPROFIT CORPORATION ANNUAL REPORT 1996</b> |  | <b>FLORIDA DEPARTMENT OF STATE</b><br>Sandra B. Morham<br>Secretary of State<br>DIVISION OF CORPORATIONS |
|---|---|--|

**DOCUMENT # N19485 (4)**

1. Corporation Name

**DESTINY CHURCH, INC.**



|   |  |
|---|--|
| Principal Place of Business<br><b>3110 HOWELL BRANCH RD.<br/>WINTER PARK FL 32792</b> | Mailing Address<br><b>P.O. BOX 1386<br/>WINTER PARK FL 32790</b> |
|---|--|

|   |  |
|---|--|
| 3. Date Incorporated or Qualified<br><b>03/03/1987</b>  | 3a. Date of Last Report<br><b>04/05/1995</b>           |
| 4. FEI Number<br><b>59-2896693</b>  | Applied For<br><input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/>   | <b>\$8.75 Additional Fee Required</b>                  |
| 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>   | <b>\$5.00 May Be Added to Fees</b>                     |
| 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |  |

|   |                                  |
|---|----------------------------------|
| 2. Principal Place of Business<br><b>21</b> | 2a. Mailing Address<br><b>26</b> |
| Suite, Apt. #, etc.                         | Suite, Apt. #, etc.              |
| City & State<br><b>22</b>                   | City & State<br><b>27</b>        |
| Zip<br><b>23</b>                            | Country<br><b>28</b>             |
| Country<br><b>24</b>                        | Zip<br><b>29</b>                 |
| Country<br><b>25</b>                        | Country<br><b>30</b>             |

**9. Name and Address of Current Registered Agent**

**GEORGE, REV. JAMES, JR.  
5101 ANDREA BLVD.  
ORLANDO FL 32807**

**10. Name and Address of New Registered Agent**

|  |           |
|--|-----------|
| 81. Name   |           |
| 82. Street Address (P.O. Box Number is Not Acceptable) |           |
| 83.  |           |
| 84. City   | <b>FL</b> |
| 85. Zip Code   |           |

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE **Rev. James George, Jr.**  
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

**May 21, 96**  
Date

| 12. OFFICERS AND DIRECTORS |                                  | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |  |
|----------------------------|----------------------------------|---|--|
| TITLE                      | <b>PD</b>                        | 1.1 TITLE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME                       | <b>GEORGE, REV. JAMES, SCOTT</b> | 1.2 NAME  |  |
| STREET ADDRESS             | <b>1411 HIBISCUS AVE.</b>        | 1.3 STREET ADDRESS                                    |  |
| CITY-ST-ZIP                | <b>WINTER PARK FL 32789</b>      | 1.4 CITY-ST-ZIP                                       |  |
| TITLE                      | <b>TD</b>                        | 2.1 TITLE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME                       | <b>GEORGE REV. JAMES JR.</b>     | 2.2 NAME  |  |
| STREET ADDRESS             | <b>5101 ANDREA BLVD.</b>         | 2.3 STREET ADDRESS                                    |  |
| CITY-ST-ZIP                | <b>ORLANDO FL 32807</b>          | 2.4 CITY-ST-ZIP                                       |  |
| TITLE                      | <b>SD</b>                        | 3.1 TITLE   | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       | <b>PHILIPS JEFF</b>              | 3.2 NAME  |  |
| STREET ADDRESS             | <b>4815 MAGNOLIA ---</b>         | 3.3 STREET ADDRESS                                    | <b>1792 Chilean Ln.</b>  |
| CITY-ST-ZIP                | <b>WINTER PARK FL 32789 ---</b>  | 3.4 CITY-ST-ZIP                                       | <b>Winter Park, FL 32792</b>   |
| TITLE                      | <b>D</b>                         | 4.1 TITLE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME                       | <b>WESTCOTT, JOHN</b>            | 4.2 NAME  |  |
| STREET ADDRESS             | <b>2345 MIDDLETON AVE</b>        | 4.3 STREET ADDRESS                                    |  |
| CITY-ST-ZIP                | <b>WINTER PARK FL</b>            | 4.4 CITY-ST-ZIP                                       |  |
| TITLE                      |                                  | 5.1 TITLE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME                       |                                  | 5.2 NAME  |  |
| STREET ADDRESS             |                                  | 5.3 STREET ADDRESS                                    |  |
| CITY-ST-ZIP                |                                  | 5.4 CITY-ST-ZIP                                       |  |
| TITLE                      |                                  | 6.1 TITLE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME                       |                                  | 6.2 NAME  |  |
| STREET ADDRESS             |                                  | 6.3 STREET ADDRESS                                    |  |
| CITY-ST-ZIP                |                                  | 6.4 CITY-ST-ZIP                                       |  |

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

**SIGNATURE: Rev. James George, Jr.**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**5/21/96**

**407-273-7244**

Date

Daytime Phone #

CR2E037 (12/95)