2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44226

FILED Feb 21, 2007 Secretary of State

Entity Name: DESTINY MINISTRIES, INC. **Current Principal Place of Business: New Principal Place of Business:** 2511 NORTH GRADY TAMPA, FL 33607 **Current Mailing Address: New Mailing Address:** 2511 NORTH GRADY TAMPA, FL 33607 FEI Number: 59-3065917 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WHITE, RANDY 4110 HÍGHLAND PARK CIR. LUTZ, FL 33549 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition WHITE, DR. RANDY Name: Name: Address: 3806 SAN PEDRO Address: City-St-Zip: TAMPA, FL City-St-Zip: Title: STD Title: () Delete () Change () Addition Name: WHITE, PAULA, Name: Address: 3806 SAN PEDRO Address: City-St-Zip: TAMPA, FL City-St-Zip: Title: () Delete Title: (X) Change () Addition MCGINNIS, RUTH Name: CARRINGTON, NORVA Name: 3704 WALLACE AVE. 2511 N GRADY AVENUE Address: Address: City-St-Zip: TAMPA, FL City-St-Zip: TAMPA, FL 33607

I hereby certify that the information supplied with this filing does not qualify for the 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: NORVA CARRINGTON DIR 02/21/2007