2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 26, 2000 8:00 am
Secretary of State
05-26-2000 90111 043 ****70.00

DOCUMENT # N96000003164

1. Entity Name

NEW DESTINY CHRISTIAN CENTER CHURCH, INC.

103308

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
5396 SILVERSTAR ROAD ORLANDO FL 32808	5396 SILVERSTAR ROAD ORLANDO FL 32818-1729

2. Principal Place of Business	3. Mailing Address
4400 N. Powers Dr.	4400 N. Powers Dr.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: ORLANDO, FL	City & State: ORLANDO, FL
Zip: 32818 Country:	Zip: 32818 Country:

4. FEI Number: 59-3383244 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
TIMS, ZACHERY JR. 5396 SILVERSTAR ROAD ORLANDO FL 32808	Name: TIMS, ZACHERY JR. Street Address (P.O. Box Number is Not Acceptable): 4400 N. Powers Dr City: ORLANDO FL Zip Code: 32818

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.

SIGNATURE: Zachery Tims Jr. CEO/Pastor 5/01/00
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25	9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees	Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD TIMS, ZACHERY JR. 1033 FEATHERSTONE CT. OCOEE FL 34761	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 2309 Mountain Spruce St. Ocoee, FL 34761
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD TIMS, RIVA F 1033 FEATHERSTONE CT. OCOEE FL 34761	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 2309 Mountain Spruce St Ocoee FL 34761
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD ESANNASON, FRED 8607 WHITE ROSE DRIVE ORLANDO FL 32818	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD ESANNASON, MARGURITE 8607 WHITE ROSE DRIVE ORLANDO FL 32818	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (9/99)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 617, 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: Zachery Tims Jr. 5/01/00 407 298-5770
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #