2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 04, 2006 08:00 AM
Secretary of State

DOCUMENT # N96000003164

1. Entity Name
NEW DESTINY CHRISTIAN CENTER CHURCH, INC.

Principal Place of Business	Mailing Address
505 E.MCCORMICK RD APOPKA, FL 32703	505 E.MCCORMICK RD APOPKA, FL 32703

08012006 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

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

TIMS, ZACHERY JR.
9935 LAKE LOUISE DRIVE
WINDERMERE, FL 34786

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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: Zachery Tims SR. PASTOR 8/3/2006
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by September 6, 2006

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

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	TIMS, ZACHERY JR.
STREET ADDRESS	9935 LAKE LOUISE DRIVE
CITY-ST-ZIP	WINDERMERE, FL 34785
TITLE	VPD
NAME	TIMS, RIVA F
STREET ADDRESS	9935 LAKE LOUISE DRIVE
CITY-ST-ZIP	WINDERMERE, FL 34785
TITLE	TD
NAME	ESANNASON, FRED
STREET ADDRESS	1780 CAROLINA WREN
CITY-ST-ZIP	OCOEE, FL 34760
TITLE	SD
NAME	ESANNASON, MARGURITE
STREET ADDRESS	1780 CAROLINA WREN DR.
CITY-ST-ZIP	OCOEE, FL 34760
TITLE	D
NAME	BARRETT, ADA
STREET ADDRESS	6820 WOODGRAIN COURT
CITY-ST-ZIP	OCOEE, FL 34761
TITLE	D
NAME	CHARLES, NILSA
STREET ADDRESS	309 STERLING LAKE DRIVE
CITY-ST-ZIP	OCOEE, FL 34761

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08/04/06-80002-002 70.00

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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 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: [signature] SECRETARY DIRECTOR 8/3/2006
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

407-298-5220