

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000003164

FILED  
Jul 29, 2010  
Secretary of State

**Entity Name:** NEW DESTINY CHRISTIAN CENTER CHURCH, INC.

**Current Principal Place of Business:**

505 E.MCCORMICK RD  
APOPKA, FL 32703

**New Principal Place of Business:**

**Current Mailing Address:**

505 E.MCCORMICK RD  
APOPKA, FL 32703

**New Mailing Address:**

**FEI Number:** 59-3383244

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

TIMS, ZACHERY JR.  
8327 VIA VERONA  
ORLANDO, FL 32836 US

**Name and Address of New Registered Agent:**

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:**

Title: PD  
Name: TIMS, ZACHERY JR.  
Address: 8327 VIA VERONA  
City-St-Zip: ORLANDO, FL 32836

Title: D  
Name: ANDERSON, SAM  
Address: 4282 MCKINNON ROAD  
City-St-Zip: WINDERMERE, FL 34786

Title: TD  
Name: ESANNASON, FRED  
Address: 1780 CAROLINA WREN  
City-St-Zip: OCOEE, FL 34761

Title: SD  
Name: ESANNASON, MARGUERITE  
Address: 1780 CAROLINA WREN DR.  
City-St-Zip: OCOEE, FL 34761

Title: D  
Name: BARRETT, ADA  
Address: 6820 WOODGRAIN COURT  
City-St-Zip: OCOEE, FL 34761

I hereby 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 all other like empowered.

SIGNATURE: MARGUERITE ESANNASON

SD

07/29/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date