## 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N96000003164

FILED Feb 17, 2012 Secretary of State

Entity Name: NEW DESTINY CHRISTIAN CENTER CHURCH, INC.

**New Principal Place of Business: Current Principal Place of Business:** 

505 E.MCCORMICK RD APOPKA, FL 32703

**Current Mailing Address: New Mailing Address:** 

505 E.MCCORMICK RD APOPKA, FL 32703

FEI Number: 59-3383244 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:

TIMS, ZACHERY JR WHITE, PAULA 7512 DR. PHILLIPS BLVD., STE. 50, 505 E. MCCORMICK ROAD ORLANDO, FL 32819 APOPKA, FL 32703

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: PAULA WHITE

02/17/2012 Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

WHITE, PAULA Name:

Address: 505 E. MCCORMICK ROAD City-St-Zip: APOPKA, FL 32703

Title:

Name: FULLER, HAROLD Address: 426 ALEXANDRIA PLACE City-St-Zip: APOPKA, FL 32712

Title:

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

Title: SD

Name: ESANNASON, MARGUERITE 1780 CAROLINA WREN DR. Address:

City-St-Zip: OCOEE, FL 34761

Title:

ROBINSON, WANDA Name: 4103 SEYBOLD AVE. Address: ORLANDO, FL 32808 City-St-Zip:

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 02/17/2012