

2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Oct 03, 2006
Secretary of State

DOCUMENT# N98000000661

Entity Name: DESTIN ASSEMBLY MINISTRIES, INC.**Current Principal Place of Business:**726 LEGION DR.
DESTIN, FL 32541**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 928
DESTIN, FL 32540**New Mailing Address:**726 LEGION DRIVE
DESTIN, FL 32541**FEI Number:** 59-3283458**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ROGERS, JOSEPH A REV.
726 LEGION DR.
DESTIN, FL 32541 US**Name and Address of New Registered Agent:**POOLE, JASON L REV.
726 LEGION DR.
DESTIN, FL 32541 US

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: JASON L. POOLE

10/03/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ROGERS, JOSEPH A
Address: 726 LEGION DR.
City-St-Zip: DESTIN, FL 32541

Title: D () Delete
Name: DAVIS, HERSHEL G
Address: 726 LEGION DR.
City-St-Zip: DESTIN, FL 32541

Title: D () Delete
Name: YOST, GLENN
Address: 726 LEGION DR.
City-St-Zip: DESTIN, FL 32541

Title: D () Delete
Name: TAYLOR, JOHN
Address: 726 LEGION DR.
City-St-Zip: DESTIN, FL 32541

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: POOLE, JASON L
Address: 726 LEGION DR.
City-St-Zip: DESTIN, FL 32541

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JASON L. POOLE

D

10/03/2006

Electronic Signature of Signing Officer or Director

Date