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Apr 29 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **719980** (5)

1. Corporation Name

TEEN MISSIONS INTERNATIONAL, INC.

Principal Place of Business

Mailing Address

**885 E. HALL RD.
MERRITT ISLAND FL 32953-8443
US**

**885 E. HALL RD.
MERRITT ISLAND FL 32953-8443
US**

3. Date Incorporated or Qualified

12/31/1970

4. FEI Number

23-7125177

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

7. Is this nonprofit corporation a homeowners association?
☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BLAND, ROBERT M
293 LAUREN COURT
MERRITT ISLAND FL 32952**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	☐ DELETE
NAME	LANE, ROBERT G	
STREET ADDRESS	305 BAHAMA DR	
CITY-ST-ZIP	MERRITT ISLAND, FL 00000	

TITLE	D	☐ DELETE
NAME	BLAND, BERNICE M	
STREET ADDRESS	293 LAUREN COURT	
CITY-ST-ZIP	MERRITT ISLAND, FL 00000	

TITLE	ST	☐ DELETE
NAME	WILL, GAYLE	
STREET ADDRESS	491 SEACREST AVE	
CITY-ST-ZIP	MERRITT ISLAND, FL 00000	

TITLE	D	☐ DELETE
NAME	STEVENS, LEONARD	
STREET ADDRESS	1425 FAYE AVE.	
CITY-ST-ZIP	LAKELAND FL	

TITLE	V	☒ DELETE
NAME	PERSON, JAMES	
STREET ADDRESS	235 ANDROSS DR.	
CITY-ST-ZIP	MERRITT ISLAND FL	

TITLE	PM	☐ DELETE
NAME	BLAND, ROBERT M	
STREET ADDRESS	293 LAUREN COURT	
CITY-ST-ZIP	MERRITT ISLAND, FL 00000	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	V/D	☒ Change ☐ Addition
1.2 NAME	LANE, ROBERT G	
1.3 STREET ADDRESS	305 BAHAMA DR	
1.4 CITY-ST-ZIP	MERRITT ISLAND, FL 32952	

2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		

3.1 TITLE	S/T/D	☒ Change ☐ Addition
3.2 NAME	WILL, GAYLE	
3.3 STREET ADDRESS	491 SEACREST AVE	
3.4 CITY-ST-ZIP	MERRITT ISLAND, FL 32953	

4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		

5.1 TITLE	D	☐ Change ☒ Addition
5.2 NAME	MYERS, SHAWNA	
5.3 STREET ADDRESS	215 HEAVENLY ST	
5.4 CITY-ST-ZIP	MERRITT ISLAND, FL 32953	

6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, on the attachment with an address.

SIGNATURE:

Robert M. Bland
SIGNATURE AND TYPED ON THE BOTTOM OF SIGNATURE OFFICER OR DIRECTOR

April 12, 98 (407) 453 0350
Date Daytime Phone

CR2E037 (10/97)