2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N04000001955

FILED Jun 28, 2007 Secretary of State

Entity Name: FEED THEM FIRST MISSIONS, INC.

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

1754 CAPE CORAL PARKWAY EAST 1754 CAPE CORAL PARKWAY EAST

SUITE 101 SUITE 101

CAPE CORAL, FL 33904 CAPE CORAL, FL 33904

Current Mailing Address: New Mailing Address:

1754 CAPE CORAL PARKWAY EAST 1754 CAPE CORAL PARKWAY EAST

SUITE 101 SUITE 101

CAPE CORAL, FL 33904 CAPE CORAL, FL 33904 US

FEI Number: 01-0807104 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BULGERIN, D.C., WAYNE A 1754 CAPE CORAL PARKWAY EAST SUITE 101 CAPE CORAL, FL 33904 US

OFFICERS AND DIRECTORS:

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

BULGERIN, D.C., WAYNE A BULGERIN, D.C., WAYNE A Name: Name:

1754 CAPE CORAL PARKWAY EAST, SUITE 101 Address: 1754 CAPE CORAL PARKWAY EAST, SUITE 101 Address:

City-St-Zip: CAPE CORAL, FL 33904 City-St-Zip: CAPE CORAL, FL 33904 US

Title: Title: () Change (X) Addition () Delete

Name: Name: CARLSON, REV. SHARYL

Address: Address: 1754 CAPE CORAL PARKWAY EAST, SUITE 101

City-St-Zip: City-St-Zip: CAPE CORAL, FL 33914 US

Title: () Delete Title: () Change (X) Addition

BULGERIN, SHIRLEY Name: Name:

1754 CAPE CORAL PARKWAY EAST, SUITE 101 Address: Address:

City-St-Zip: City-St-Zip: CAPE CORAL, FL 33904 US

I hereby certify that the information supplied with this filing does not qualify 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: WAYNE A. BULGERIN, D.C. Ρ 06/28/2007