

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N16000000362

**Entity Name:** MOMS ON A MISSION INC.

**Current Principal Place of Business:**

14806 OPAL RIDGE PL  
WIMAUMA, FL 33598

**Current Mailing Address:**

14806 OPAL RIDGE PL  
WIMAUMA, FL 33598 US

**FEI Number:** 81-3794377

**Certificate of Status Desired:** No

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

SHANNON, NATASHIA  
14806 OPAL RIDGE PL  
WIMAUMA, FL 33598 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title	PD	Title	VPD
Name	SHANNON, NATASHIA	Name	BROUGHTON, JOAI
Address	12413 CEDARFIELD DR	Address	518 SCARLET MAPLE CT
City-State-Zip:	RIVERVIEW FL 33579	City-State-Zip:	PLANT CITY FL 33563

*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:** NATASHIA SHANNON

**PRESIDENT**

**04/29/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date