

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005489

Entity Name: ETERNAL MISSION, INC.**Current Principal Place of Business:**8501 SW 54 CT
MIAMI, FL 33143**Current Mailing Address:**8501 SW 54 CT
MIAMI, FL 33143 US**FEI Number:** 65-0950079**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ROWELL, JOE
5103 BUTLER RIDGE DR
WINDERMERE, FL 34786 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	D
Name	ROWELL, JOE
Address	5103 BUTLER RIDGE DR
City-State-Zip:	WINDERMERE FL 34786

Title	D
Name	RICHARD, GETCHELL
Address	7025 SW 70 AVE
City-State-Zip:	MIAMI FL 33143

Title	D
Name	VELMA, COTTLE
Address	719 TRANQUIL TRAIL
City-State-Zip:	WINTER GARDEN FL 34787

Title	D
Name	SUZANNE, SNYDER
Address	11503 LIPSEY ROAD
City-State-Zip:	TAMPA FL 33618

Title	D
Name	CARLOS, VARELA
Address	5880 SW 99 TR
City-State-Zip:	MIAMI FL 33156

Title	SECRETARY
Name	RESTREPO, MARTHA C
Address	8501 SW 54 CT
City-State-Zip:	MIAMI FL 33143

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: MARTHA RESTREPO**SECRETARY****02/02/2015**_____
Electronic Signature of Signing Officer/Director Detail_____
Date