

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

DOCUMENT# F08000005230

**Entity Name:** MIO FRONTIERS, INC.

**Current Principal Place of Business:**

939 S. EDWARD DRIVE  
TEMPE, AZ 85281

**Current Mailing Address:**

PO BOX 60670  
PHOENIX, AZ 85082 US

**FEI Number:** 95-3731505

**Certificate of Status Desired:** No

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

INCORP SERVICES, INC.  
17888 67TH COURT NORTH  
LOXACHATCHEE, FL 33470 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 CEO  
Name PECKHAM, R.  
Address PO BOX 60670  
City-State-Zip: PHOENIX AZ 85082

Title CHAIRMAN  
Name ROUTH, B.  
Address PO BOX 60670  
City-State-Zip: PHOENIX AZ 85082

Title CFO  
Name SADAR, J. STEPHEN  
Address PO BOX 60670  
City-State-Zip: PHOENIX AZ 85082

Title TREASURER  
Name SADAR, J. STEPHEN  
Address PO BOX 60670  
City-State-Zip: PHOENIX AZ 85082

Title SECRETARY  
Name DVORET, C.  
Address PO BOX 60670  
City-State-Zip: PHOENIX AZ 85082

Title DIRECTOR  
Name HOLZMANN, S.  
Address PO BOX 60670  
City-State-Zip: PHOENIX AZ 85082

Title DIRECTOR  
Name SJOLUND, P  
Address PO BOX 60670  
City-State-Zip: PHOENIX AZ 85082

Title DIRECTOR  
Name LIVERMAN, J  
Address PO BOX 60670  
City-State-Zip: PHOENIX AZ 85082

**Continues on page 2**

*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:** J. STEPHEN SADAR

**TREASURER**

**03/14/2018**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name FEY, M  
Address PO BOX 60670  
City-State-Zip: PHOENIX AZ 85082

Title DIRECTOR  
Name HAWTHORNE, S  
Address PO BOX 60670  
City-State-Zip: PHOENIX AZ 85082

Title PRESIDENT  
Name BLINCOE, R  
Address PO BOX 60670  
City-State-Zip: PHOENIX AZ 85082