

**2022 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F20000003212

**Entity Name:** THE MISSION CONTINUES, INC.**Current Principal Place of Business:**1141 S. 7TH STREET  
ST. LOUIS, MO 63104**Current Mailing Address:**PO BOX 12129  
DENVER, CO 80212 US**FEI Number:** 20-8742553**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATE CREATIONS NETWORK INC.  
801 US HIGHWAY 1  
NORTH PALM BEACH, FL 33408 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 CHAIRMAN  
Name ADAE, NANA  
Address 1141 S. 7TH STREET  
City-State-Zip: ST. LOUIS MO 63104

Title DIRECTOR  
Name O'SULLIVAN, MEGHAN  
Address 1141 S. 7TH STREET  
City-State-Zip: ST. LOUIS MO 63104

Title TREASURER, VP  
Name KORTEKAAS, LEN  
Address 1141 S. 7TH STREET  
City-State-Zip: ST. LOUIS MO 63104

Title D  
Name CULVER, JOHN  
Address 1141 S. 7TH STREET  
City-State-Zip: ST. LOUIS MO 63104

Title PRESIDENT  
Name BRUGGEMAN, MARY BETH  
Address 1141 S. 7TH STREET  
City-State-Zip: ST. LOUIS MO 63104

Title DIRECTOR  
Name FLOURNOY, MICHELE  
Address 1141 S. 7TH STREET  
City-State-Zip: ST. LOUIS MO 63104

Title CHIEF DEVELOPMENT OFFICER  
Name KOVACS, JENNIFER  
Address 1141 S. 7TH STREET  
City-State-Zip: ST. LOUIS MO 63104

Title SENIOR VP  
Name LESPERANCE, LAURA  
Address 1141 S. 7TH STREET  
City-State-Zip: ST. LOUIS MO 63104

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*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: MARY BETH BRUGGEMAN****PRESIDENT****01/11/2022**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title CFO  
Name SMOOT, AUTUMN  
Address 1141 S. 7TH STREET  
City-State-Zip: ST. LOUIS MO 63104

Title CHIEF PROGRAMS OFFICER  
Name THAXTON, SUSAN  
Address 1141 S. 7TH STREET  
City-State-Zip: ST. LOUIS MO 63104