


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2005 08:00 AM
Secretary of State

DOCUMENT # 714543 1. Entity Name ANTIOCH MISSION INTERNATIONAL, INC.	
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Principal Place of Business 4310 THOMPSON AVENUE SEBRING, FL 33872	Mailing Address PO BOX 1277 JUPITER, FL 33468
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03052005 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-6211860	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent HOPKINS, LEONARD E 4310 THOMPSON AVE. SEBRING, FL 33872
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when re-registering) DATE _____
Signature, typed or printed name of registered agent and title if applicable

**Filing Fee is \$61.25
Due by May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

1100000299201

04/11/05-80098-013 70.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD HOPKINS, LEONARD E 4310 THOMPSON AVE. SEBRING, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VDC HOPKINS, WESLEY L APARTADO POSTAL 2-292 GUADALAJARA, JALISCO, MEXICO, OH 44281
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD HOPKINS, ALICE F 4310 THOMPSON AVE. SEBRING, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD PRICE, AMOS E 4078 SILVERLAKE DRIVE PALATKA, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Leonard E. Hopkins **LEONARD E. HOPKINS** APRIL 5, 2005 **850-449-4475**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #