

2002 UNIFORM BUSINESS REPORT (UBR)

FILED

May 06, 2002 8:00 am
Secretary of State

05-06-2002 90197 021 ****61.25

DOCUMENT # 719295

1. Entity Name

INTERNATIONAL MISSIONS INC.

Principal Place of Business

6594 COUNTY ROAD 18
HAMPTON FL 32044
US

Mailing Address

PO BOX 46
HAMPTON FL 32044
US

2. Principal Place of Business

6594 County Rd 18
Suite, Apt. #, etc.
HAMPTON FL
City & State

3. Mailing Address

INT. MISSIONS INC
Suite, Apt. #, etc.
P.O. Box 46
City & State
HAMPTON, FL

Zip Country

32044 BRADFORD

Zip Country

32044 BRADFORD

6. Name and Address of Current Registered Agent

CARSWELL, JOHN E
5949 SE 4TH AVE
KEYSTONE HEIGHTS FL 32656

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing

Trust Fund Contribution

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE PD
NAME WILSON, RONALD D
STREET ADDRESS 6500 BERNICE RD
CITY-ST-ZIP KEYSTONE HEIGHTS FL 32656

TITLE D
NAME WILSON, JAN P
STREET ADDRESS 6500 BERNICE RD
CITY-ST-ZIP KEYSTONE HEIGHTS FL 32656

TITLE D
NAME WILSON, STEPHEN P.
STREET ADDRESS 6500 BERNICE RD
CITY-ST-ZIP KEYSTONE HEIGHTS FL 32656

TITLE D
NAME CARSWELL, BETTINA J.
STREET ADDRESS 6594 CR 18
CITY-ST-ZIP HAMPTON FL

TITLE D
NAME CARSWELL, JOHN E
STREET ADDRESS 5949 S.E. 4TH AVE
CITY-ST-ZIP KEYSTONE HEIGHTS FL 32656

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PRES.
NAME STEPHEN P. WILSON
STREET ADDRESS 6500 BERNICE RD.
CITY-ST-ZIP KEYSTONE HEIGHTS, FL 32656

TITLE VICE PRES.
NAME JOSEPH D. WILSON
STREET ADDRESS 4648 GOLDEN SPIKE CT.
CITY-ST-ZIP JACKSONVILLE, FL 32257

TITLE DIRECTOR
NAME Darlene Godwin
STREET ADDRESS 7074 S.W. 107th WAY
CITY-ST-ZIP HAMPTON, FL 32044

TITLE DIRECTOR
NAME JAN P. WILSON
STREET ADDRESS 6500 BERNICE Rd.
CITY-ST-ZIP KEYSTONE Hgts, FL 32656

TITLE DIRECTOR
NAME JOHN E. CARSWELL
STREET ADDRESS 5949 SE. 4th ave
CITY-ST-ZIP KEYSTONE Heights, FL 32656

TITLE DIRECTOR
NAME PRISCILLA WILSON
STREET ADDRESS 6500 BERNICE Rd.
CITY-ST-ZIP KEYSTONE Heights, FL 32656

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: RONALD D. WILSON
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
4-17-02 352-475-5913
Date Daytime Phone #

CR2E037 (9/01)