

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 768748

1. Entity Name

MISSIONARY VENTURES INTERNATIONAL, INC.

FILED
Mar 18, 2002 8:00 am
Secretary of State

03-18-2002 90192 027 ****61.25

Principal Place of Business

5528 COMMERCE DR.
ORLANDO FL 32839-2978

Mailing Address

P.O. BOX 593550
ORLANDO FL 32839-2978

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2321060

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BEAM, STEVEN G.
5528 COMMERCE DR.
ORLANDO FL 32809

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete
NAME PD
STREET ADDRESS BEAM, STEVEN G.
CITY-ST-ZIP 5528 COMMERCE DR.
ORLANDO FL 32839

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME VD
STREET ADDRESS OWEN, TALMADGE L
CITY-ST-ZIP 3100 GULF BLVD, #414
BELLAIR BEACH FL

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 5528 Commerce Drive
CITY-ST-ZIP Orlando, FL 32839

TITLE ☐ Delete
NAME T
STREET ADDRESS SKIPPER, STAN
CITY-ST-ZIP 2007 W. DELEON AVE UNIT A
TAMPA FL 33606

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Delete
NAME S
STREET ADDRESS LILLY, HOWARD DR. JR
CITY-ST-ZIP 7251 LAKE DR.
ORLANDO FL 32809

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME S
STREET ADDRESS Robert Howard
CITY-ST-ZIP 5528 Commerce Dr
Orlando, FL 32839

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Signature of Steven G. Beam
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-4-02
Date

407 859-7322
Daytime Phone #

CR2E037 (9/01)