2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768748

FILED Jan 12, 2006 Secretary of State

Entity Name: MISSIONARY VENTURES INTERNATIONAL, INC.

Current Principal Place of Business: New Principal Place of Business:

5528 COMMERCE DR. 5528 COMMERCE DR. ORLANDO, FL 328392978 COMMERCE DR. ORLANDO, FL 32839

Current Mailing Address: New Mailing Address:

P.O. BOX 593550 P.O. BOX 593550 ORLANDO, FL 328392978 P.O. BOX 593550 ORLANDO, FL 32859

FEI Number: 59-2321060 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

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

BEAM, STEVEN G.
5528 COMMERCE DR.
ORLANDO, FL 32839 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: 01/12/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: BEAM, STEVEN G., Name: BEAM, STEVEN G

Address: 5528 COMMERCE DR. Address: 5528 COMMERCE DR. City-St-Zip: ORLANDO, FL 32839 City-St-Zip: ORLANDO, FL 32839

Title: VD () Delete Title: () Change () Addition Name: OWEN, TALMADGE L Name:

Address: 5528 COMMERCE DRIVE Address: City-St-Zip: ORLANDO, FL 32839 City-St-Zip:

Title: C () Delete Title: SEC (X) Change () Addition

 Name:
 HALL, GARY
 Name:
 MCGRATH, WILLIAM

 Address:
 243 TIMBERLAND AVE
 Address:
 1804 CAPE BEND

 City-St-Zip:
 LONGWOOD, FL 32750
 City-St-Zip:
 TAMPA, FL 33613

Title: ST () Delete Title: TREA (X) Change () Addition

 Name:
 MILLER, ROBERT
 Name:
 HALL, GARY

 Address:
 411 WHITE OAK CIR.
 Address:
 243 TIMBERLAND AVE

 City-St-Zip:
 MAITLAND, FL 32751
 City-St-Zip:
 LONGWOOD, FL 32750

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: STEVEN G BEAM PRES 01/12/2006