


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 27, 2007 8:00 am**  
**Secretary of State**

03-27-2007 90004 049 \*\*\*\*61.25

<b>DOCUMENT # 826412</b>	
1. Entity Name OMS INTERNATIONAL, INC.	

Principal Place of Business 941 FRY ROAD PO BOX A GREENWOOD, IN 46142-1821	Mailing Address 941 FRY ROAD PO BOX A GREENWOOD, IN 46142-1821
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2. Principal Place of Business - No P.O. Box # <i>Same</i>	3. Mailing Address <i>Same</i>
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Suite, Apt. #, etc.	Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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01032007 Chg-NP CR2E037 (12/06)

4. FEI Number 95-1891575	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent  PORTER, ARCHIE 419 76TH AVE ST PETERSBURG BEACH, FL	
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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**Filing Fee is \$61.25  
Due by May 1, 2007**

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

**Make check payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD LONG, DAVID C PRESIDE 941 FRY ROAD GREENWOOD, IN <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SKINNER, ROGER 941 FRY RD GREENWOOD, IN 46142 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V DICK, DAVID 941 FRY RD GREENWOOD, IN 46142 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T BISHOP, KURT 941 FRY ROAD GREENWOOD, IN 46142 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S DOTY, SHEILA A. 941 FRY ROAD GREENWOOD, IN 46142 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	BOT AUSLEY, LISA REV 107 ARROW POINT COVE VALPARAISO, FL 32580 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Sheila A. Doty*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/23/07

Date

317/881-6751

Daytime Phone #

**OMS INTERNATIONAL INC**  
**BOARD OF TRUSTEES**  
**March 2007**

**ATTACHMENT**

40042002

# 826412

- 1) **Rev. Lisa Ausley (Rurel)**  
107 Arrowpoint Cove  
Valparaiso FL 32580
- 2) **Dr. J. Duane Beals (Charlotte Ann)**  
3445 Creekwater Lane  
South Bend IN 46635
- 3) **Dr. Harold Burgess (Marcia)**  
300 McPheeters Dr.  
Wilmore KY 40390
- 4) **Dr. Robert Coleman (Marietta)**  
142 Essex St., Apt 120  
South Hamilton, MA 01982
- 5) **Mr. James Culver (Barbara)**  
31600 SW Village Crest Court  
Wilsonville OR 97070
- 6) **Dr. Carl Fliermans (Ruth Ann)**  
3 Century Oaks Circle  
Augusta GA 30909-6014
- 7) **Rev. Clifford Good (Charlene)**  
1126 S. E. 56<sup>th</sup> Avenue  
Hillsboro, OR 97123
- 8) **Mrs. Thelma Goold (William)**  
407 Kenyon Ave.  
Wilmore KY 40390
- 9) **Rev. Rudy Heintzelman (Janet)**  
PO Box 241347  
Montgomery AL 36124-1347
- 10) **Mr. Wesley Lytle (Becky)**

**PRESIDENT OF OMS INTERNATIONAL:**

**David Long** (Lori)  
P. O. Box A  
Greenwood, IN 46142

ATTACHMENT

40042002  
# 826412

**CORPORATE SECRETARY:**

**Miss Sheila Doty**  
PO Box A  
Greenwood IN 46142

**INTERNATIONAL SENDING COUNTRY REPRESENTATIVES**

**AUSTRALIA**

**Mr. Lynden Trickey**  
41 Victoria Crescent  
Mont Albert VIC 3127  
Australia

**CANADA**

**Mr. Kurt Frers (Marg)**  
1432 Wheelwright Rd.  
Oakville ON L6M2Z4  
Canada

**NEW ZEALAND**

**Mr. Neil Houghton** (Shirley)  
Maungakawa Road, RR 4  
Morrinsville 2251  
New Zealand

**SOUTH AFRICA**

**Mr. Dawie Crous** (Elda)  
PO Box 7960  
1734 Westgate  
South Africa

**UNITED KINGDOM**

**Mr. Jim Faulkner**  
35 Durham Road  
Spennymoor  
County Durham DL16 6JN  
United Kingdom