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NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Feb 23, 1999 8:00 am  
Secretary of State

02-23-1999 90003 014 \*\*\*\*70.00

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1. Corporation Name

UNITED STATES MISSION CORPORATION

Principal Place of Business

1154 N. WESTERN AV.  
LOS ANGELES CA 90029

Mailing Address

8314 GREENWOOD AV. NORTH  
BOX 17  
SEATTLE WA 98103



2. Principal Place of Business

21 4905 E. JENSEN AVE.

Suite, Apt. #, etc.

22 City & State  
FRESNO, CA

23 Zip Country  
93725 USA

24 93725 25 USA

2a. Mailing Address

26 8314 GREENWOOD AVE, NORTH

Suite, Apt. #, etc.

27 #17  
City & State  
SEATTLE, WA

28 Zip Country  
98103 USA

29 98103 30 USA

3. Date Incorporated or Qualified

04/04/1995

4. FEI Number

94-1585260

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

Trust Fund Contribution

\$5.00 May Be  
Added to Fees

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME BATTLE, JOSEPH A JR  
STREET ADDRESS 4905 E JENSEA AVE  
CITY-ST-ZIP FRESNO CA 93725

TITLE CD ☐ DELETE

NAME KIGHT, MORRIS  
STREET ADDRESS 1154 N. WESTERN AVE.  
CITY-ST-ZIP LOS ANGELES CA 90029

TITLE SD ☐ DELETE

NAME JONES, BRIAN  
STREET ADDRESS 8314 GREENWOOD AVE N BOX 17  
CITY-ST-ZIP SEATTLE WA

TITLE D ☐ DELETE

NAME TEMPLE, CAREY  
STREET ADDRESS 1154 N. WESTERN AVE.  
CITY-ST-ZIP LOS ANGELES CA 90029

TITLE D ☐ DELETE

NAME GUNTER, GLEN  
STREET ADDRESS 4545 NE GARFIELD  
CITY-ST-ZIP PORTLAND OR 92211

TITLE VP ☐ DELETE

NAME ROBBINS, MICHAEL  
STREET ADDRESS 420 SOUTH FIFTH ST  
CITY-ST-ZIP SAN JOSE CA 95112

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

1956 N. BEACHWOOD DR #2  
LOS ANGELES, CA 90028

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

8314 GREENWOOD AVE, NORTH #17  
SEATTLE, WA 98103

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

1919 S. HARVARD BLVD.  
LOS ANGELES, CA 90018

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Brian Jones SIGNATURE REQUIRED SECRETARY-GENERAL 1/6/99 (206) 781-9113  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

0062282

CR2E037 (11/98)