

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000001006

FILED  
Feb 05, 2008  
Secretary of State

**Entity Name:** INTERNATIONAL MISSION SUPPORT FOUNDATION INC.

**Current Principal Place of Business:**

P.O. BOX 531284  
MIAMI SHORES, FL 33153

**New Principal Place of Business:**

445 NE. 195TH.  
APT. 226  
N. MIAMI BEACH, FL 33179

**Current Mailing Address:**

P.O. BOX 531284  
MIAMI SHORES, FL 33153

**New Mailing Address:**

**FEI Number:** 65-0871455      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

DUCILLE, WINONA J  
445 N.E. 195TH STREET  
APT. 226  
NORHT MIAMI, FL 33179 US

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

DUCILLE, WINONA J  
445 N.E. 195TH STREET  
APT. 226  
NORTH MIAMI BEACH, FL 33179 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: \_\_\_\_\_

02/05/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: CV ( ) Delete  
Name: HERON, HENRY RICHARD  
Address: 1780 NE 158TH STREET  
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: VC ( ) Delete  
Name: HINKSON, FRANK G  
Address: 4858 NW 112 DRIVE  
City-St-Zip: CORAL SPRINGS, FL 33076

Title: D ( ) Delete  
Name: THOMPSON, KEITH L SR  
Address: 15971 NE 19 COURT  
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: D ( ) Delete  
Name: DICK, ROYLAND  
Address: 10504 INDIGO LANE  
City-St-Zip: FAIRFAX, VA 22032

Title: P ( ) Delete  
Name: DUCILLE, WINONA J  
Address: 445 NE 195TH STREET SUITE 226  
City-St-Zip: NORTH MIAMI BEACH, FL 33179

Title: ST ( ) Delete  
Name: ROBINSON, CLAIRE M  
Address: 445 NE 195TH STREET APT. 222  
City-St-Zip: NORTH MIAMI, FL 33179

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: DICK, ROYLON  
Address: 10504 INDIGO LANE  
City-St-Zip: FAIRFAX, VA 22032

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: WINONA DUCILLE

OD

02/05/2008

Electronic Signature of Signing Officer or Director

Date