

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005486

FILED  
May 19, 2006  
Secretary of State

**Entity Name:** EUDENE'S MISSION INTERNATIONAL MINISTRIES, INC.

**Current Principal Place of Business:**

1714 W WASHINGTON ST  
ORLANDO, FL 32805

**New Principal Place of Business:**

**Current Mailing Address:**

1714 W WASHINGTON ST  
ORLANDO, FL 32805

**New Mailing Address:**

**FEI Number:** 59-3726927 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

FREDERICK, EUDENE B  
1805 W WASHINGTON ST  
ORLANDO, FL 32805 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: HUBBARD-FREDERICK, EUDENE B  
Address: 6609 VERNON ST  
City-St-Zip: ORLANDO, FL 32818

Title: SD ( ) Delete  
Name: HARRELL-CARSON, BETTIE  
Address: 4957 SIGNAL HILL RD  
City-St-Zip: ORLANDO, FL 33585

Title: TD ( ) Delete  
Name: RACKLEY, RODNEY  
Address: 14337 BENDING BRANCH CT  
City-St-Zip: ORLANDO, FL 32824

Title: D ( ) Delete  
Name: DE PRADINE, GLORIA-JEAN  
Address: 550 CONSTITUTION DR  
City-St-Zip: ORLANDO, FL 32809

Title: D ( ) Delete  
Name: GOMEZ, NEBRADO  
Address: 2032 ARUBA CT  
City-St-Zip: KISSIMMEE, FL 34741

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

Title: PD (X) Change ( ) Addition  
Name: HUBBARD-FREDERICK, EUDENE B  
Address: 1710 W. WASHINGTON STR EET  
City-St-Zip: ORLANDO, FL 32805

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

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: GLORIA DE PRADINE

D

05/19/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date