## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N00000005617

Entity Name: MERCY IN ACTION, INC.

FILED Mar 29, 2004 Secretary of State

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

114 NORTH MT CLAIR AVE 8712 HIGH STREET BRANDON, FL 33510 TAMPA, FL 33614

Current Mailing Address: New Mailing Address:

PO BOX 76113 TAMPA, FL 336751113

FEI Number: 59-3667351 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

HULL, M. DIANNE
1161 NORTH MT CLAIR AVE
8712 HIGH STREET
BRANDON, FL 33510
HULL, M. DIANNE
8712 HIGH STREET
TAMPA, FL 33614

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: REV. M. DIANNE HULL 03/29/2004

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P
 ( ) Delete
 Title:
 P
 ( X) Change ( ) Addition

 Name:
 HULL, M. DIANNE
 Name:
 HULL, M. DIANNE

 Name:
 HOLL, M. DIANNE

 Address:
 1519 E. 15TH AVENUE
 Address:
 8712 HIGH STREET

 City-St-Zip:
 TAMPA, FL 33605
 City-St-Zip:
 TAMPA, FL 33614

Title: TSD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 BLICKENDERFER, MRS. VIVIANE
 Name:

 Address:
 4223 CARTNAL DR
 Address:

 City-St-Zip:
 TAMPA, FL 33624 0
 City-St-Zip:

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 BLICKENSDERFER, ATTORNEY M
 Name:

 Address:
 4223 CARTNAL DR
 Address:

 City-St-Zip:
 TAMPA, FL 33624
 City-St-Zip:

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 DENOOYER, NORMAN
 Name:

 Address:
 2655 EASTERN AVE. S.E.
 Address:

 City-St-Zip:
 GRAND RAPIDS, MI 49507
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: REV. M. DIANNE HULL PRES 03/29/2004