

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N01816

FILED
Feb 19, 2003
Secretary of State

Entity Name: MISSIONARY COMPANION MINISTRIES, INC.

Current Principal Place of Business:

307 HALTON CIRCLE
SEFFNER, FL 33584

New Principal Place of Business:

1104 SOUTH TAYLOR RD
SEFFNER, FL 33584 US

Current Mailing Address:

307 HALTON CIRCLE
SEFFNER, FL 33584

New Mailing Address:

1104 SOUTH TAYLOR RD
SEFFNER, FL 33584 US

FEI Number: 59-2348290

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AKERS, JAMES M
307 HALTON CIRCLE
SEFFNER, FL 33584 US

Name and Address of New Registered Agent:

AKERS, JAMES M
1104 SOUTH TAYLOR RD
SEFFNER, FL 33584 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: JAMES M. AKERS

02/19/2003

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: RASMUSSEN, DON,
Address: 3639 WOODHILL DRIVE
City-St-Zip: BRANDON, FL

Title: D () Delete
Name: CLARKE, WILLIAM,
Address: 12409 KELSO RD.
City-St-Zip: THONOTOSASSA, FL

Title: D () Delete
Name: LOONEY, TONY,
Address: 456 N.W. 15TH AVENUE
City-St-Zip: CAMAS, WA

Title: D () Delete
Name: FULLER, MARY,
Address: 9401 NE 110 AVENUE
City-St-Zip: VANCOUVER, WA

Title: D () Delete
Name: AKERS, JAMES
Address: 307 HALTON CIR
City-St-Zip: SEFFNER, FL 33584

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: RASMUSSEN, DON,
Address: 409 GREYSON COURT
City-St-Zip: FAYETTEVILLE, NC 28314

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: AKERS, JAMES M
Address: 1104 SOUTH TAYLOR RD
City-St-Zip: SEFFNER, FL 33584

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: JAMES M. AKERS

D

02/19/2003

Electronic Signature of Signing Officer or Director

Date