## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02000002916

8125 S MADISON LKS CIR

**DAVIE. FL 33328** 

Address:

City-St-Zip:

FILED Jan 13, 2009 Secretary of State

Entity Name: MERCY'S ACTION MISSION, INC. **Current Principal Place of Business: New Principal Place of Business:** 1310 JOHNSON ST HOLLYWOOD, FL 33019 **Current Mailing Address: New Mailing Address:** 1310 JOHNSON ST HOLLYWOOD, FL 33019 FEI Number: 43-1965314 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: CRISTEA, MIORIKA 8125 S. MADISON LAKES CIR DAVIE, FL 33328 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete PETRILA, LUCICA Name: Name: Address: 1310 JOHNSON ST Address: City-St-Zip: HOLLYWOOD, FL 33019 City-St-Zip: Title: DST () Delete Title: () Change () Addition Name: PETRILA, REBECCA Name: Address: 1310 JOHNSON ST Address: City-St-Zip: HOLLYWOOD, FL 33019 City-St-Zip: Title: () Delete Title: () Change () Addition CRISTEA, MIORIKA Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: LUCICA PETRILA DP 01/13/2009