

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003986

Entity Name: ISLEGO MISSIONS, INC.

FILED
Jun 28, 2009
Secretary of State

Current Principal Place of Business:

550 CIDERMILL PLACE
LAKE MARY, FL 32746

New Principal Place of Business:

Current Mailing Address:

550 CIDERMILL PLACE
LAKE MARY, FL 32746

New Mailing Address:

FEI Number: 74-3044969 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:

COOPER, JAMES N JR.
550 CIDERMILL PLACE
LAKE MARY, FL 32746 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: P () Delete
Name: MAY, JAMES
Address: 1365 MOSS POINT DRIVE
City-St-Zip: SOUTHAVEN, MS 38671 US

Title: D () Delete
Name: COOPER, JAMES
Address: 550 CIDERMILL PLACE
City-St-Zip: LAKE MARY, FL 32746 US

Title: T/S () Delete
Name: COOPER, CORINNE M
Address: 550 CIDERMILL PLACE
City-St-Zip: LAKE MARY, FL 32746 US

Title: D () Delete
Name: STODDART, MICHAEL
Address: LITTLE RIVER POST OFFICE
City-St-Zip: LILLIPUT DISTRICT, SJ JAMAICA WI

Title: D () Delete
Name: RAHILL, PAUL
Address: 141 MINEHAHA ROAD
City-St-Zip: MAITLAND, FL 32751 US

Title: D () Delete
Name: WILLIS, THOM
Address: 1671 KINGSTON ROAD
City-St-Zip: LONGWOOD, FL 32750 US

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: () Change () Addition
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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 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: JAMES N. COOPER, JR.

REV. _____

06/28/2009

Electronic Signature of Signing Officer or Director

Date