2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009169

Entity Name: KEEP THE FAITH MISSIONS, INC

FILED Apr 30, 2004 Secretary of State

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Current P	rincipal Place of Business:	New Prince	New Principal Place of Business:		
	LVE OAKS DR. SPRINGS, FL 32708		2636 TOPSAIL HILL STREET ORLANDO, FL 32828		
Current Mailing Address:		New Maili	New Mailing Address:		
312 TWELVE OAKS DR. WINTER SPRINGS, FL 32708		2636 TOPSAIL HILL STREET ORLANDO, FL 32828			
FEI Number: FEI Number Applied For ()		FEI Number Not Applicable (X) Certificate of Status Desired ()			
Name and	Address of Current Registered Agent:	Name and	Address of	New Registered Agent:	
	INCORPORATORS, INC. DEN RIVER PKWY., STE. 300 L 33647 US				
	e named entity submits this statement for the e of Florida.	purpose of changing i	ts registered	office or registered agent, or both,	
SIGNATUI	RE:				
	Electronic Signature of Registered Ag	ent		Date	
OFFICERS AND DIRECTORS:		ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	D () Delete MIXON, TERRIE L 312 TWELVE OAKS DR. WINTER SPRINGS, FL 32708	Title: Name: Address: City-St-Zip:	MIXON, TER	IL HILL STREET	
Title: Name: Address: City-St-Zip:	D () Delete UNGARO, RICHARD 5413 SHINGLE CREEK DR. ORLANDO, FL 32832	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete GEIER, TOM 810 SILVER ROSE CT. LAKE MARY, FL 32746	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	D (X) Delete LAREAU, STEVE 2133 PALM CREST DR. APOPKA, FL 32704	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete BARRETT, SANDRA J 2288 BROADWAY, #5 SAN FRANCISCO, CA, 94115	Title: Name: Address: City-St-Zin:		() Change () Addition	

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: TERRIE L. MIXON D 04/30/2004