

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005401

FILED
Jan 03, 2005
Secretary of State

Entity Name: MISSIONARIES SAMARITANS IN ACTION, INC.

Current Principal Place of Business:

1410 W. MICHIGAN STREET
ORLANDO, FL 32805

New Principal Place of Business:

Current Mailing Address:

1410 W. MICHIGAN STREET
ORLANDO, FL 32805

New Mailing Address:

FEI Number: 45-0523005

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FREDERICK, LIONEL P
3202 MCEWAN LANE
ORLANDO, FL 32812 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/D () Delete
Name: FREDERICK, LIONEL P
Address: 3202 MCEWAN LANE
City-St-Zip: ORLANDO, FL 32812

Title: T () Delete
Name: JEAN-PIERRE, JACQUELINE
Address: 2805 GRASSMERE LANE
City-St-Zip: ORLANDO, FL 32818

Title: D () Delete
Name: GRIFFIN, SHARON
Address: 1837 FRUITWOOD COURT
City-St-Zip: ORLANDO, FL 32818

Title: D () Delete
Name: CHARLES, CLERMETIDE
Address: 2622 CHAR ST.
City-St-Zip: ORLANDO, FL 32839

Title: D () Delete
Name: COLIN, SERGE
Address: 5 YOUMANS DR. APT #1
City-St-Zip: SPRING VALLEY, NY 10977

Title: T () Delete
Name: COLIN, FERNANDE
Address: 313 DRAKE ELM DR.
City-St-Zip: KISSIMMEE, FL 34743

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
Name:
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 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: LIONEL P. FREDERICK

D

01/03/2005

Electronic Signature of Signing Officer or Director

Date