## 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000008389

Apr 07, 2012 Secretary of State

Entity Name: THROUGH HIS EYES MISSION, INC.

Current Principal Place of Business: New Principal Place of Business:

2213 CYPRESS ISLAND DR 201 N 11TH AVE

03 ARCADIA, FL 34266 US

POMPANO BEACH, FL 33069 US

Current Mailing Address: New Mailing Address:

2213 CYPRESS ISLAND DR 201 N 11TH AVE

203 ARCADIA, FL 34266 US

POMPANO BEACH, FL 33069 US

FEI Number: 16-1695089 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:

GRIMES, SHASTA
2213 CYPRESS ISLAND DR
201 N 11TH AVE
ARCADIA, FL 34266 US

POMPANO BEACH, FL 33069 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: SHASTA GRIMES 04/07/2012

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: D

 Name:
 GRIMES, SHASTA

 Address:
 201 N 11TH AVE

 City-St-Zip:
 ARCADIA, FL 34266 US

Title: PIO

Name: REMINGTON, CHARITY
Address: 338 BOEING STREET NW
City-St-Zip: LAKE PLACID, FL 33852 US

Title: ED

 Name:
 REMINGTON, CHRISTA

 Address:
 10435 SW 5TH ST

 City-St-Zip:
 MIAMI, FL 33174

Title: CFO

 Name:
 BUITRAGO, CARLOS

 Address:
 355 NW 109TH AVE #613

 City-St-Zip:
 MIAMI, FL 33172

I hereby 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 all other like empowered.

SIGNATURE: SHASTA GRIMES PRES 04/07/2012