2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001535

FILED Jul 19, 2005 Secretary of State

Entity Name: COMMISSIONED INTERNATIONAL COALITION, INC.

Current Principal Place of Business: New Principal Place of Business: 608 W OAKLAND AVE OAKLAND, FL 34760 **Current Mailing Address: New Mailing Address:** P O BOX 930 OAKLAND, FL 34760 FEI Number: 59-3451478 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: Name and Address of New Registered Agent: FOWLER, JOSHUA FOWLER, JOSHUA 15001 OAKLAND AVENUE 13949 FOX GLOVE ST WINTER GARDEN, FL 34787 WINTER GARDEN, FL 34787 US 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: 07/19/2005 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete FOWLER, JOSHUA FOWLER, JOSHUA Name: Name: Address: 13949 FOX GLOVE ST Address: 15001 OAKLAND AVENUE City-St-Zip: WINTER GARDEN, FL 34787 City-St-Zip: WINTER GARDEN, FL 34787 Title: () Delete Title: (X) Change () Addition FOWLER, DEBORAH Name: Name: FOWLER, DEBORAH Address: 13949 FOX GLOVE ST Address: 15001 OAKLAND AVENUE City-St-Zip: WINTER GARDEN, FL 34787 City-St-Zip: WINTER GARDEN, FL 34787 Title: () Delete Title: () Change () Addition OLMEDO, DANA Name: Name: 14029 FOX GLOVE ST Address: Address: City-St-Zip: WINTER GAREN, FL 34787 City-St-Zip: Title: () Delete Title: () Change () Addition Name: WHITE, DAN Name: 1251 FROMMAGE WAY Address: Address: City-St-Zip: JACKSONVILLE, FL 32225 City-St-Zip: Title: Title: () Delete () Change () Addition CHISM, TAMMY Name: Name: 3160 S 129TH EAST AVE Address: Address: City-St-Zip: TULSA, OK 74134 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.

Ρ SIGNATURE: JOSHUA FOWLER 07/19/2005