


**2006 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jun 19, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT # N04000004587 1. Entity Name FOUNDATION FOR INTERNATIONAL MISSIONS, INC.	
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Principal Place of Business 1ST PRESBYTERIAN CHURCH OF ST PETERSBURG 701 BEACH DR NE ST PETERSBURG, FL 33701-2618	Mailing Address 1ST PRESBYTERIAN CHURCH OF ST PETERSBURG 701 BEACH DR NE ST PETERSBURG, FL 33701-2618
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**DO NOT WRITE IN THIS SPACE**

06102006 No Chg-NP CR2E037 (4/06)

4. FEI Number 20-1118431	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  EATON, DAVID A SR C/O DAVID A. EATON, P.A. 8801 MARTIN L. KING ST N ST PETERSBURG, FL 33702-3443	<b>DO NOT WRITE IN THIS SPACE</b>
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_


<b>Filing Fee is \$81.25 Due by September 6, 2006</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRINKMAN, KYLE R 5128 49 AVE N ST PETERSBURG, FL 337095916
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COATES, ROBERT M 4150 HELENA ST NE ST PETERSBURG, FL 337035449
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HOCHADEL, THOMAS J 1178 42 AVE NE NE ST PETERSBURG, FL 337035238
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHLECHT, SUSAN 1227 14TH AVE N SAINT PETERSBURG, FL 33705
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEWIS, JOSEPH A 11908 HADLEIGH WAY TRINITY, FL 346557164
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHLECHT, GLEN 1227 14TH AVE N SAINT PETERSBURG, FL 33705

U00000567308  
06/19/06-80002-012 70.00

**DO NOT WRITE  
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  Kyle R Brinkman Treasurer 6-10-06 7274556931

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #