2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 14, 2006
Secretary of State

DOCUMENT# N04000008479

Entity Name: MISSION FOR ORPHANS, INC.

Current Principal Place of Business:

579 W SPRING TREE WAY
LAKE MARY, FL 32746

New Principal Place of Business:

211 LOURDAN CT
DEBARY, FL 32713

Current Mailing Address:

579 W SPRING TREE WAY
LAKE MARY, FL 32746

New Mailing Address:

PO BOX 950760
LAKE MARY, FL 32795

FEI Number: 20-1686490 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RUMLEY, E. GENE
579 W SPRING TREE WAY
LAKE MARY, FL 32746 US

Name and Address of New Registered Agent:

RUMLEY, E. GENE
211 LOURDAN CT
DEBARY, FL 32713 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: E. GENE RUMLEY 02/14/2006
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: RUMLEY, E. GENE
Address: 579 W SPRING TREE WAY
City-St-Zip: LAKE MARY, FL 32746

Title: VPT ( ) Delete
Name: RUMLEY, ARLENE J
Address: 579 W SPRING TREE WAY
City-St-Zip: LAKE MARY, FL 32746

Title: S ( ) Delete
Name: SCOTT, JENNIFER M
Address: 249 MORNING GREEK CIR
City-St-Zip: APOPKA, FL 32712

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: RUMLEY, E. GENE
Address: PO BOX 950760
City-St-Zip: LAKE MARY, FL 32795

Title: VPT (X) Change ( ) Addition
Name: RUMLEY, ARLENE J
Address: PO BOX 950760
City-St-Zip: LAKE MARY, FL 32795

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 Chapter 119, 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: E .GENE RUMLEY P 02/14/2006
Electronic Signature of Signing Officer or Director Date