

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N04945**

(4)

1. Corporation Name

PRO MISSIONS, INC.



Principal Place of Business

Mailing Address

**C/O W.C. JONES
619 EIGHTH AVENUE
CRESTVIEW FL 32536-2101**

**C/O W.C. JONES
619 EIGHTH AVENUE
CRESTVIEW FL 32536-2101**

3. Date Incorporated or Qualified
08/31/1984

3a. Date of Last Report
04/19/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip Country

29 Zip Country

4. FEI Number
59-2447465

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**JONES, W.C.
5859 FRIENDSHIP LANE
CRESTVIEW FL 32536**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PD** ☐ DELETE
NAME **ERVIN, JIMMY, (DR)**
STREET ADDRESS **8351 STAVENGELD**
CITY-ST-ZIP **CORDOVA TN**

TITLE **C** ☐ DELETE
NAME **JONES, W.C.**
STREET ADDRESS **5859 FREINDSHIP LANE**
CITY-ST-ZIP **CRESTVIEW FL**

TITLE **VD** ☒ DELETE
NAME **JAEB, STEPHEN**
STREET ADDRESS **3409 FOREST RIDGE CIRCLE**
CITY-ST-ZIP **BRANDON FL**

TITLE **TD** ☐ DELETE
NAME **SKELTON, BILL (REV)**
STREET ADDRESS **2941 KATE BOND ROAD**
CITY-ST-ZIP **MEMPHIS TN 38133**

TITLE **DMOB** ☐ DELETE
NAME **VINCENT, ROBERT (DR)**
STREET ADDRESS **266 S. CLEVELAND**
CITY-ST-ZIP **MEMPHIS TN**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE **P/D** ☒ Change ☐ Addition
12 NAME **Ervin, James A. (Dr.)**
13 STREET ADDRESS **8351 Stavenger Cove**
14 CITY-ST-ZIP **Cordova, TN 38018**

21 TITLE **C** ☒ Change ☐ Addition
22 NAME **Jones, W.C.**
23 STREET ADDRESS **5859 Friendship Lane**
24 CITY-ST-ZIP **Crestview, FL 32536**

31 TITLE **D** ☐ Change ☒ Addition
32 NAME **Phillips, Harry (Dr.)**
33 STREET ADDRESS **8264 Barberry Place**
34 CITY-ST-ZIP **Southaven, MS 38671**

41 TITLE ☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

51 TITLE **D** ☒ Change ☐ Addition
52 NAME **Vincent, Robert (Dr.)**
53 STREET ADDRESS **7398 West Desoto Rd.**
54 CITY-ST-ZIP **Walls, MS 38680**

61 TITLE **D** ☐ Change ☒ Addition
62 NAME **McNeal, Larry**
63 STREET ADDRESS **1717 Russell Pkwy**
64 CITY-ST-ZIP **Warner Robbins, GA 31095**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

James A. Ervin
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

James A. Ervin

1/26/96

Date

901-377-1150

Daytime Phone #

CR2E037 (12/95)