

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 04, 2008 8:00 am
Secretary of State

02-04-2008 90033 011 ****61.25

DOCUMENT # N05000000527 1. Entity Name MISSIONS MADE POSSIBLE, INC.					
Principal Place of Business 884 E MICHIGAN ST ORLANDO FL 32806			Mailing Address 884 E MICHIGAN ST ORLANDO FL 32806		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 34-2031951	
Zip		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HAMRICK, ALEX H 1000 LEGION PLACE SUITE 1700 ORLANDO FL 32801				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code 	
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 must be filed with this statement)					
FILE NOW: FEE IS \$61.25 Due By May 1, 2008		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees		Make Check Payable to Florida Department of State	
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GUILL, KEN 884 E MICHIGAN ST ORLANDO, FL 32806	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DAVIS, JOHN R 884 E MICHIGAN ST ORLANDO FL 32806	☒ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KEMMERER, JOSEPH 884 E MICHIGAN ST ORLANDO FL 32806	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SWICKE, ANNETTE J 884 E MICHIGAN ST ORLANDO FL 32806	☒ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC. TANYA AULT 884 E MICHIGAN ST. ORLANDO, FL 32806	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CHUCK REED 884 E MICHIGAN ST. ORL. FL 32806	☐ Delete			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 1109, 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 officer-like empowered.					

SIGNATURE *Kenneth L. Guill* **KENNETH L. GUILL PRES. 1-25-08 9:29 859**