

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011106

Entity Name: MISSION BUILDERS INC.

FILED
May 07, 2007
Secretary of State

Current Principal Place of Business:

3140 PINE FOREST ROAD
CANTONMENT, FL 32533

New Principal Place of Business:

Current Mailing Address:

3140 PINE FOREST ROAD
CANTONMENT, FL 32533

New Mailing Address:

FEI Number: 33-1009168 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:

WHITE, DONNIE R
3140 PINE FOREST ROAD
CANTONMENT, FL 32533 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FOWLER, ELMA A
Address: 949 GREEN HILLS ROAD
City-St-Zip: CANTONMENT, FL 32533

Title: VP () Delete
Name: WHITE, CHRISTOPHER R
Address: 3160 PINE FOREST ROAD
City-St-Zip: CANTONMENT, FL 32533

Title: SEC () Delete
Name: WHITE, DONNIE R
Address: 3140 PINE FOREST ROAD
City-St-Zip: CANTONMENT, FL 32533

Title: TRES () Delete
Name: WHITE, DONNIE R
Address: 3140 PINE FOREST ROAD
City-St-Zip: CANTONMENT, FL 32533

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: DONNIE R. WHITE

TRES

05/07/2007

Electronic Signature of Signing Officer or Director

Date