

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2008 8:00 am
Secretary of State

04-25-2008 90129 006 ****70.00

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1. Entity Name
TEEN MISSIONS IN CAMBODIA, INC.



Principal Place of Business
**885 E HALL RD
MERRITT ISLAND, FL 32953**

Mailing Address
**885 E HALL RD
MERRITT ISLAND, FL 32953**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04162008 Chg-NP CR2E037 (12/06)

4. FEI Number
20-4079601

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BLAND, ROBERT M
885 E HALL RD
MERRITT ISLAND, FL 32953**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing 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

TITLE PD ☐ Delete
NAME **BLAND, ROBERT M**
STREET ADDRESS **293 LAUREN CT**
CITY-ST-ZIP **MERRITT ISLAND, FL 32952**

TITLE VPD ☐ Delete
NAME **VANDERPOOL, KATHERINE S**
STREET ADDRESS **885 E HALL RD**
CITY-ST-ZIP **MERRITT ISLAND, FL 32953**

TITLE SD ☐ Delete
NAME **WILL, GAYLE**
STREET ADDRESS **491 SEACREST AVE**
CITY-ST-ZIP **MERRITT ISLAND, FL 32953**

TITLE D ☐ Delete
NAME **LANE, ROBERT G**
STREET ADDRESS **305 BAHAMA DR**
CITY-ST-ZIP **MERRITT ISLAND, FL 32952**

TITLE TD ☒ Delete
NAME **TROUT, DARLA**
STREET ADDRESS **885 E HALL RD**
CITY-ST-ZIP **MERRITT ISLAND, FL 32953**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME **TD**
STREET ADDRESS **Lane, Robert G.**
CITY-ST-ZIP **305 Bahama Dr.**
Merritt Island FL 32952

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 my address, with all other officers, directors, and trustees.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Robert M. Bland
April 18, 08 (321) 453 0350