

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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

04-25-2008 90129 013 \*\*\*\*70.00

DOCUMENT # N05000012595

1. Entity Name  
TEEN MISSIONS IN SOUTH AFRICA, 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.

04162008

Chg-NP

CR2E037 (12/06)

City & State

City & State

4. FEI Number  
20-4079767

Applied For

Not Applicable

Zip

Country

Zip

Country

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete  
NAME BLAND, ROBERT M  
STREET ADDRESS 293 LAURM CT  
CITY-ST-ZIP MERRITT ISLAND, FL 32953

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

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

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

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

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

TITLE D ☐ Delete  
NAME LANE, ROBERT G  
STREET ADDRESS 305 BAHAMA DR  
CITY-ST-ZIP MERRITT ISLAND, FL 32953

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

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

TITLE DT ☐ Change ☒ Addition  
NAME Aronson, Linda  
STREET ADDRESS 885 E Hall Rd  
CITY-ST-ZIP Merritt Island FL 32953

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☐ Change ☒ Addition  
NAME Maher, Linda  
STREET ADDRESS 885 E Hall Rd  
CITY-ST-ZIP Merritt Island FL 32953

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 an address with all the information required.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

*Robert M. Bland*  
4/13/08 April 13, 08 (321) 453-0350