

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000002412

FILED  
Apr 20, 2009  
Secretary of State

Entity Name: TEEN MISSIONS OVERSEAS, INC.

## Current Principal Place of Business:

885 E HALL RD  
MERRITT ISLAND, FL 32953

## New Principal Place of Business:

## Current Mailing Address:

885 E HALL RD  
MERRITT ISLAND, FL 32953

## New Mailing Address:

FEI Number: 20-4466097

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

BLAND, ROBERT M  
885 E HALL RD  
MERRITT ISLAND, FL 32953 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: PD ( ) Delete  
Name: BLAND, ROBERT M  
Address: 293 LAUREN CT  
City-St-Zip: MERRITT ISLAND, FL 32952

Title: VPD ( ) Delete  
Name: VANDERPOOL, KATHERINE S  
Address: 885 E. HALL RD  
City-St-Zip: MERRITT ISLAND, FL 32953

Title: SD ( ) Delete  
Name: WILL, GAYLE  
Address: 491 SEACREST AVE  
City-St-Zip: MERRITT ISLAND, FL 32953

Title: D ( ) Delete  
Name: LANE, ROBERT G  
Address: 305 BAHAMA DR.  
City-St-Zip: MERRITT ISLAND, FL 32953

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: BLAND, ROBERT M  
Address: 885 E HALL RD  
City-St-Zip: MERRITT ISLAND, FL 32953

Title: VD (X) Change ( ) Addition  
Name: VANDERPOOL, KATHERINE S  
Address: 885 E. HALL RD  
City-St-Zip: MERRITT ISLAND, FL 32953

Title: STD (X) Change ( ) Addition  
Name: WILL, GAYLE  
Address: 885 E HALL RD  
City-St-Zip: MERRITT ISLAND, FL 32953

Title: D (X) Change ( ) Addition  
Name: LANE, ROBERT G  
Address: 885 E HALL RD  
City-St-Zip: MERRITT ISLAND, FL 32953

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: ROBERT M BLAND

PD

04/20/2009

Electronic Signature of Signing Officer or Director

Date