

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000011412

FILED
May 01, 2007
Secretary of State

Entity Name: PROJECT MISSION, INC.

Current Principal Place of Business:

1400 GRASSLANDS BLVD., #50
LAKELAND, FL 33803

New Principal Place of Business:

Current Mailing Address:

1400 GRASSLANDS BLVD., #50
LAKELAND, FL 33803

New Mailing Address:

FEI Number: FEI Number Applied For (X) 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:

DANIEL MEDINA, P.A.
902 S. FLORIDA AVENUE
LAKELAND, FL 33803 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: PSTD () Delete
Name: MORELOCK, CURTIS
Address: 1400 GRASSLANDS BLVD.
City-St-Zip: LAKELAND, FL 33803

Title: D () Delete
Name: GREENLEE, JOYCE
Address: 2628 HOLLY PLACE
City-St-Zip: LEESBURG, FL 34748

Title: D () Delete
Name: TUCKER, MAXWELL
Address: 16845 ALMAR LANE
City-St-Zip: DADE CITY, FL 33523

Title: D () Delete
Name: SCHUH, RAYMOND
Address: 4528 ROUTE 436
City-St-Zip: DANSVILLE, NY 14437

Title: D () Delete
Name: CANTON, KEITH
Address: 257 E. 10TH STREET, #2
City-St-Zip: NEW YORK, NY 10009

Title: D () Delete
Name: PATE, TOMMY
Address: 964 SUMMERFIELD DRIVE
City-St-Zip: LAKELAND, FL 33803

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
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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: CURT MORELOCK

D

05/01/2007

Electronic Signature of Signing Officer or Director

Date