2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 14, 2009
Secretary of State

DOCUMENT# N06000012488

Entity Name: FAITHFUL SERVANT MISSIONS INC.

Current Principal Place of Business:

13126 JOHNS ISLAND COURT
JACKSONVILLE, FL 32224

New Principal Place of Business:

Current Mailing Address:

13126 JOHNS ISLAND COURT
JACKSONVILLE, FL 32224

New Mailing Address:

FEI Number: 20-5999087 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.
13302 WINDING OAKS BLVD
SUITE A-100
TAMPA, FL 336123425 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: PROCTOR, GARY
Address: 13126 JOHNS ISLAND COURT
City-St-Zip: JACKSONVILLE, FL 32224

Title: S ( ) Delete
Name: OVERBY, JULIANNE
Address: 2452 PULLIAN STREET
City-St-Zip: JACKSONVILLE BEACH, FL 33250

Title: T ( ) Delete
Name: BRADFORD, LARRY C
Address: 13126 JOHNS ISLAND COURT
City-St-Zip: JACKSONVILLE, FL 32224

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: PEREZ, EDWARD
Address: 106 KNOTTY PINE TRAIL
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: S (X) Change ( ) Addition
Name: BRADFORD, CHERYL
Address: 13126 JOHNS ISLAND COURT
City-St-Zip: JACKSONVILLE, FL 33224

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: CHERYL L BRADFORD S 01/14/2009

Electronic Signature of Signing Officer or Director — Date