2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000001872

Entity Name: LINC-UP MISSIONS, INC.

FILED Apr 29, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 15850 COUNTY ROAD 108 HILLIARD, FL 32046 **Current Mailing Address: New Mailing Address:** P.O. BOX 572 HILLIARD, FL 32046 FEI Number: 20-5610462 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ALLEN, RICHARD L JR 15850 COUNTY ROAD 108 HILLIARD, FL 32046 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete ALLEN, RICHARD L JR Name: Name: Address: 27395 NEW FRONT STREET Address: City-St-Zip: HILLIARD, FL 32046 City-St-Zip: Title: () Delete Title: () Change () Addition Name: FRANKLIN, BOBBY Y II Name: Address: 37224 HIGGINBOTHAM DRIVE Address: City-St-Zip: HILLIARD, FL 32046 City-St-Zip: Title: () Delete Title: () Change () Addition HAYES, JACKIE EUGENE Name: Name: 4135 PALM BLUFF DRIVE Address: Address: City-St-Zip: HILLIARD, FL 32034 City-St-Zip: Title: SD () Delete Title: () Change () Addition Name: DRAKE, PAUL DAVID Name: 96842 ARRIGO DRIVE Address: Address: City-St-Zip: FERNANDINA BEACH, FL 32034 City-St-Zip: Title: VCD () Delete Title: () Change () Addition ALDRIDGE, MICHAEL A Name: Name: 90 PEBBLE LANE Address: Address: City-St-Zip: DOUGLAS, GA 31537 City-St-Zip: Title: () Delete Title: () Change (X) Addition MICHEALS, JOE III Name: Name: Address: Address: 371822 HENRY SMITH RD HILLIARD, FL 32046 City-St-Zip: 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: RICHARD L ALLEN JR PD 04/29/2008