2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 02, 2009
Secretary of State

DOCUMENT# N07000003622

Entity Name: MISSION 4 GIVING, INC.

Current Principal Place of Business:

2575 WOODGROVE RD
ORANGE PARK, FL 32003 49

New Principal Place of Business:

7100 HIGHWAY 17 SOUTH
GREEN COVE SPRINGS, FL 32043

Current Mailing Address:

2575 WOODGROVE RD
ORANGE PARK, FL 32003 49

New Mailing Address:

2575 WOODGROVE RD
FLEMING ISLAND, FL 32003

FEI Number: 20-8914965 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

AKINS, DAVID L
447 GARDEN VIEW TERR.
ORANGE PARK, FL 32003 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: DAVID, KEITH
Address: 2213 WIDE REACH DR.
City-St-Zip: ORANGE PARK, FL 32003

Title: VD ( ) Delete
Name: HIERS, GARY
Address: 4765 LAKESHORE DR. WEST
City-St-Zip: ORANGE PARK, FL 32003

Title: SD ( ) Delete
Name: SZAKS, MARK
Address: 1663 SANDY SPRINGS DR.
City-St-Zip: ORANGE PARK, FL 32003

Title: TD ( ) Delete
Name: ANDREW, JUTILA L
Address: 2575 WOODGROVE RD
City-St-Zip: ORANGE PARK, FL 32003

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
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: ANDREW JUTILA TD 04/02/2009

Electronic Signature of Signing Officer or Director — Date