2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000012078

Entity Name: 3RD DAY MISSIONS INC

FILED May 01, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4448 COOL EMERALD DRIVE TALLAHASSEE, FL 32303

Current Mailing Address: New Mailing Address:

4448 COOL EMERALD DRIVE TALLAHASSEE, FL 32303

FEI Number: 35-2318070 FEI Number Applied For () 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: Name and Address of New Registered Agent:

BAKER-ISAAC, TYNIKA BAKER-ISAAC, TYNIKA E MRS
4448 COOL EMERALD DRIVE 4448 COOL EMERALD DRIVE
TALLAHASSEE, FL 32303 US TALLAHASSEE, FL 32303 US

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: TYNIKA BAKER-ISAAC 05/01/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:D () DeleteTitle:D (X) Change () AdditionName:BAKER-ISAAC, TYNIKAName:BAKER-ISAAC, TYNIKA E MRSAddress:4448 COOL EMERALD DRIVEAddress:4448 COOL EMERALD DRIVECity-St-Zip:TALLAHASSEE, FL 32303City-St-Zip:TALLAHASSEE, FL 32303

Title: P () Delete Title: () Change () Addition

 Name:
 PORCHE, VANESSA
 Name:

 Address:
 4448 COOL EMERALD DRIVE
 Address:

 City-St-Zip:
 TALLAHASSEE, FL 32303
 City-St-Zip:

Title: VP () Delete Title: () Change () Addition

 Name:
 IRVINE, PATTI
 Name:

 Address:
 4448 COOL EMERALD DRIVE
 Address:

 City-St-Zip:
 TALLAHASSEE, FL 32303
 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: TYNIKA BAKER-ISAAC D 05/01/2009