## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N08000000580

FILED Feb 05, 2009 Secretary of State

Entity Name: THE MISSION SOUTH FLORIDA INC

**Current Principal Place of Business: New Principal Place of Business:** 1730 S. FEDERAL HIGHWAY, 267 DELRAY BEACH, FL 33483 **Current Mailing Address: New Mailing Address:** 1730 S. FEDERAL HIGHWAY, 267 DELRAY BEACH, FL 33483 FEI Number: 06-1830758 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: THOMAS, CARL J 701 AVENUE L 205A DELRAY BEACH, FL 33483 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete THOMAS, CARL J Name: Name: Address: 1730 S. FEDERAL HIGHWAY, 267 Address: City-St-Zip: DELRAY BEACH, FL 33483 US City-St-Zip: Title: () Delete Title: () Change () Addition Name: THOMAS, TRACEY M Name: Address: 1730 S. FEDERAL HIGHWAY, 267 Address: City-St-Zip: DELRAY BEACH, FL 33483 US City-St-Zip: Title: SEC () Delete Title: SEC (X) Change ( ) Addition COPELAND, DAVID L Name: COPELAND, DAVID L REV Name: 1730 S. FEDERAL HIGHWAY, 267 P.O. BOX 1076 Address: Address: City-St-Zip: DELRAY BEACH, FL 33483 US City-St-Zip: LANNETT, AL 36863 US Title: () Delete Title: **TRES** ( ) Change (X) Addition Name: Name: GRIFFIS, NATHAN REV Address: Address: P.O. BOX 266346 City-St-Zip: City-St-Zip: WESTON, FL 33326 US

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: CARL THOMAS Ρ 02/05/2009