

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Feb 05, 2010
Secretary of State

Entity Name: MISSION A.I.M., INC.

Current Principal Place of Business:

1601 UNIVERSTITY BLVD. N
JACKSONVILLE, FL 32211

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 51272
JACKSONVILLE BEACH, FL 32240

New Mailing Address:

FEI Number: 59-3448620 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AHEARN, MICHAEL S
1409 4TH STREET NORTH
JACKSONVILLE BEACH, FL 32250 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
Name: AHEARN, MICHAEL S REV
Address: 1409 4TH STREET NORTH
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: VP
Name: AHEARN, PAMELA D REV
Address: 1409 4TH STREET NORTH
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: S
Name: WILDER, CLINT D PASTOR
Address: 4183 OLD MILLCOVE TRAIL WEST
City-St-Zip: JACKSONVILLE, FL 32277

Title: T
Name: BREWER, KENNETH L DR
Address: 1946 EMILY GAIL COURT
City-St-Zip: JACKSONVILLE, FL 32218

I hereby 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 all other like empowered.

SIGNATURE: REV. MICHAEL S. AHEARN

P

02/05/2010

Electronic Signature of Signing Officer or Director

Date