

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000002493

**FILED**  
**Apr 16, 2011**  
**Secretary of State**

**Entity Name:** CITY MISSION,INC

**Current Principal Place of Business:**

1610 SOUTH ORANGE BLOSSOM TRAIL  
ORLANDO, FL 32805

**New Principal Place of Business:**

**Current Mailing Address:**

P.O BOX 621195  
OVIEDO, FL 32765 US

**New Mailing Address:**

P.O BOX 4084  
WINTER PARK, FL 32793 US

**FEI Number:** 26-2225149

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

ZION CHURCH, INC.  
1087 SUGARBERY TRAIL  
OVIEDO, FL 32765 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: PST.  
Name: CITY MISSION INC.  
Address: 209 NE TRIPLET DR  
City-St-Zip: CASSELBERRY, FL 32707 US

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: YVONNE RIVERA

PST

04/16/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date