

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000007435

FILED
Apr 15, 2009
Secretary of State

Entity Name: EVANGEL INTERNATIONAL MISSION, INC.

Current Principal Place of Business:

1108 N SKIPPER RD.
SUITE M 20
TAMPA, FL 33612

New Principal Place of Business:

Current Mailing Address:

9110 ROCKROSE DR
TAMPA, FL 33647

New Mailing Address:

FEI Number: 80-0234405

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LUCCEUS, RICARDEAU
9110 ROCKROSE DR
TAMPA, FL 33647 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 () Delete
Name: LUCCEUS, RICARDEAU
Address: 9110 ROCKROSE DR
City-St-Zip: TAMPA, FL 33647

Title: V () Delete
Name: ROCK, MARCLIN
Address: 11718 COLONY LAKES BLVD
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: T () Delete
Name: MIREILLE, TOUSSAINT
Address: 11302 SUMMER CT. APT A
City-St-Zip: TAMPA, FL 33612

Title: S () Delete
Name: ALSAINT, LEONEL
Address: 30511 MIDTOWN CT.
City-St-Zip: WESLEY CHAPEL, FL 33545

Title: M () Delete
Name: DERIVAL, FERONEL JN. PH
Address: 2450 E. HILLSBOROUGH AVE. APT 1301
City-St-Zip: TAMPA, FL 33610

Title: M () Delete
Name: MICHEL, FRITZ
Address: 14413 AUDUBON TRACE
City-St-Zip: TAMPA, FL 33613

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
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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: RICARDEAU LUCCEUS

PR

04/15/2009

Electronic Signature of Signing Officer or Director

Date