2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000009972

Entity Name: ARK MISSIONS INC

Current Principal Place of Business:	**New Principal Place of Business:**
7378 TREASURE ST NAVARRE, FL 32566 US	

Current Mailing Address:	**New Mailing Address:**
7378 TREASURE ST NAVARRE, FL 32566 US	ARKMISSIONS PO BOX 5808 NAVARRE, FL 32566

FEI Number: 20-1626845   FEI Number Applied For ( )   FEI Number Not Applicable ( )   Certificate of Status Desired (X)
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:**
VARGAS, MARK F PRES 7378 TREASURE ST NAVARRE, FL 32566 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:

Title:	A
Name:	VARGAS, MARK F
Address:	7378 TREASURE ST
City-St-Zip:	NAVARRE, FL 32566 US

Title:	P
Name:	ERICKSON, JUSTIN
Address:	8523 LAREDO
City-St-Zip:	NAVARRE, FL 32566 US

Title:	P
Name:	PLAGGEMAR, DAVID
Address:	10774 TALL PINE
City-St-Zip:	ALLENDALE, MI 49401 US

Title:	S
Name:	VARGAS, MINDY R
Address:	7378 TREASURE ST
City-St-Zip:	NAVARRE, FL 32566

Title:	P
Name:	SACKET, JIM
Address:	5329 PRAIRIE CT
City-St-Zip:	GULF BREEZE, FL 32563

Title:	D
Name:	ERICKSON, JAIMEE
Address:	8523 LAREDO
City-St-Zip:	NAVARRE, FL 32566

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: MARK F VARGAS   A   05/03/2010

Electronic Signature of Signing Officer or Director   Date