2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2011
Secretary of State

DOCUMENT# N09000005546

Entity Name: MISSION INTERACT, INC.

Current Principal Place of Business:

209 OVERLOOK DRIVE
CHULUOTA, FL 32766

New Principal Place of Business:

Current Mailing Address:

209 OVERLOOK DRIVE
CHULUOTA, FL 32766

New Mailing Address:

FEI Number: 27-0417691 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KENT, BARBARA
209 OVERLOOK DRIVE
CHULUOTA, FL 32766 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: D
Name: FINLAY, CRAIG
Address: 407 OSPREY LAKES CIRCLE
City-St-Zip: CHULUOTA, FL 32766

Title: D
Name: KENT, KYLE
Address: 209 OVERLOOK DRIVE
City-St-Zip: CHULUOTA, FL 32766

Title: D
Name: ENGLAND, STEVE
Address: 877 KENSINGTON GARDENS COURT
City-St-Zip: OVIEDO, FL 32765

Title: D
Name: WILDER, NATHAN
Address: 16264 CORNER LAKE DRIVE
City-St-Zip: ORLANDO, FL 32820

Title: D
Name: WILCOX, RANDY
Address: 3010 CURVING OAKS WAY
City-St-Zip: ORLANDO, FL 32820

Title: D
Name: BROOKS, BOBBY
Address: 1030 BIG OAKS BOULEVARD
City-St-Zip: OVIEDO, FL 32765

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: KYLE KENT D 04/30/2011

Electronic Signature of Signing Officer or Director — Date