

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000008290

FILED
Feb 22, 2011
Secretary of State

Entity Name: FAITH MISSION OF DESOTO COUNTY INC.

Current Principal Place of Business:

1109 S.E. NINTH AVE.
ARCADIA, FL 34266

New Principal Place of Business:

Current Mailing Address:

P.O. BOX #184
ARCADIA, FL 34265

New Mailing Address:

P.O. BOX 184
ARCADIA, FL 34265

FEI Number: 27-0791465

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FAIRCLOTH, EMMETT T
307 FORTUNA RD
ARCADIA, FL 34266 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: S
Name: BOONE, ANNA
Address: 1245 OSCEOLA AVE
City-St-Zip: ARCADIA, FL 34266

Title: T
Name: HOWARD, CAROLYN
Address: 2452 NW HOWARD AVE
City-St-Zip: ARCADIA, FL 34266

Title: TRUS
Name: PALMER, FRED
Address: 3029 SW HIGHWAY 17
City-St-Zip: ARCADIA, FL 34266

Title: CH
Name: JACKSON, C. WILLIS
Address: 324 W HICKORY ST.
City-St-Zip: ARCAIDA, FL 34266

Title: VCH
Name: FAIRCLOTH, JEFF
Address: 2638 NW SAMS ST.
City-St-Zip: ARCADIA, FL 34266

Title: TRUS
Name: WOOD, JUDY
Address: 1981 SE CHERRY DR
City-St-Zip: ARCADIA, FL 34266

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: C. WILLIS JACKSON

CH

02/22/2011

Electronic Signature of Signing Officer or Director

Date