

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000000601

FILED
Mar 26, 2012
Secretary of State

Entity Name: FEED MY SHEEP MISSION, INC.

Current Principal Place of Business:

6602 NORTHWEST 30TH TERRACE
GAINESVILLE, FL 32653

New Principal Place of Business:

Current Mailing Address:

6602 NORTHWEST 30TH TERRACE
GAINESVILLE, FL 32653

New Mailing Address:

FEI Number: 59-2525611

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRALAND, DAVID D
221 S. BOYD STREET
WINTER GARDEN, FL 34787 US

Name and Address of New Registered Agent:

HUMMEL, BONNIE D
6602 NW 30 TR
GAINESVILLE, FL 332653 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: BONNIE HUMMEL

03/26/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: HUMMEL, BONNIE
Address: 6602 NORTHWEST 30TH TERRACE
City-St-Zip: GAINESVILLE, FL 32653

Title: VP
Name: HUMMEL, DOUG
Address: 6602 NORTHWEST 30TH TERRACE
City-St-Zip: GAINESVILLE, FL 32653

Title: O
Name: ALLEN, JIM
Address: 1100 NORTHWEST 33RD AVENUE
City-St-Zip: GAINESVILLE, FL 32609

Title: O
Name: ALLEN, MARY
Address: 1100 NORTHWEST 33RD AVENUE
City-St-Zip: GAINESVILLE, FL 32609

Title: O
Name: KLINGER, DAVE
Address: 11751 WEST HIGHWAY 318
City-St-Zip: REDDICK, FL 32686

Title: O
Name: KLINGER, KIM
Address: 11751 WEST HIGHWAY 318
City-St-Zip: REDDICK, FL 32686

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: BONNIE HUMMEL

P

03/26/2012

Electronic Signature of Signing Officer or Director

Date