

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31472

FILED  
Feb 23, 2007  
Secretary of State

Entity Name: ADVENTURES IN MISSIONS, INC.

## Current Principal Place of Business:

6000 WELLSPRING TRAIL  
GAINESVILLE, GA 30506 US

## New Principal Place of Business:

## Current Mailing Address:

6000 WELLSPRING TRAIL  
GAINESVILLE, GA 30506 US

## New Mailing Address:

FEI Number: 65-0133113      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HITCHCOCK, CAMERON  
164 AL ALCAZAR ST  
ROYAL PALM BEACH, FL 33411 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 ( ) Delete  
Name: STU, JOHNSON  
Address: 3112 PINEHURST  
City-St-Zip: PLANO, TX 75035

Title: D ( ) Delete  
Name: OESTREICHER, DICK  
Address: 257 EDINGTON CR  
City-St-Zip: CANTON, MI 48187

Title: D ( ) Delete  
Name: FORTNER, EVERETTE  
Address: 363 NORMANDY DR  
City-St-Zip: CHARLOTTESVILLE, VA 22903

Title: D/O ( ) Delete  
Name: BARNES, SETH  
Address: 3967 C. LOGGINS RD  
City-St-Zip: GAINESVILLE, GA 30506

Title: D (X) Delete  
Name: ROGER, FISHER  
Address: 5124 SAFFIRE DR  
City-St-Zip: MARIETTA, GA 30068

Title: D (X) Delete  
Name: OESTREICHER, MARK  
Address: 1789 SLATE TERRACE  
City-St-Zip: EL CAJON, CA 92019

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: SHEARMAN, ANDREW  
Address: 13418 N MANZANITA LN  
City-St-Zip: FOUNTAIN HILLS, AZ 85268

Title: D (X) Change ( ) Addition  
Name: FISHER, ROGER  
Address: 5124 SAPPHERE DR  
City-St-Zip: MARIETTA, GA 30068

Title: ( ) Change ( ) Addition  
Name:  
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 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: JENNIFER L. ZODY

FC

02/23/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date