FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N45348

(2)

MISSIONS INTERNATIONAL, INC.

FILED Mar 20 1997 8:00am Secretary of State



Principal Place of Business Mailing Address			T 1881/JOT BAT DIDEL BYRKE CHAI 91884 COLI 91894 DISH DIBY BADAL 9184 BADAL 9184 BADAL 9184		
2548 INDIAN HILL TITUSVILLE FL 32		2548 INDIAN HILLS CT TITUSVILLE FL 32780-5928			
				3. Date incorporated or Qualified 09/26/1991	3a. Date of Last Report 03/12/1996
2. Principal Place		2a. Mailing Address 26 P. O. BOX	. 68	4. FEI Number 59-3090991	Applied For Not Applicable
Suite, Apt. #.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	O FL	City & State	GA.	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	3 25 PINELLAS	29 30421-0283	Country	8. This corporation has liability for in Florida Statutes	ntangible tax under s. 199.032, Yes X No
	9. Name and Address of Current			10. Name and Address of New Reg	jistered Agent
			81 Name C	MILDRED LINDS	FΥ
BURRELL,			82 Street Add	dress (P.O. Box Number is Not Acceptab	
	AN HILLS CT		63 6720	2-2_ 12 LST A	ve
THUSVILL	E FL 32780		63		•
			84 City C	ARGO	85 Zip Code
11 Pureuant Io	the provisions of Sections 617 0503	and 617 1509. Florida Statutes		rporation submits this statement for the p	Urnoes of changing its registered
_olfice or rec	sistered agent, or both, in the State o	of Florida. Such change was aut	thorized by the corpora	ation's board of directors. I hereby accep	t the appointment as registered
tgent (am	familiar with, and accept the obliga	ions of, Section 617.0503, Fioric	oa Statutes.	2//	2/01
SIGNATURI.	y afture. Typed or pointed risers plikeg stored agen	t and title if applicable IvOTE: F	Registered Agent signature requ	ulred when reinstating)	DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC	
TITLE	D	☐ DELETE	11 TITLE		Change Additio
NAME	LINDSEY, MILDRED		1.2 NAME		
STREET ADDRESS	6720-2 121ST AVE N		1.3 STREET ADDRESS		
CHY-SI-ZIF	LARGO FL	- December 1	1.4 CITY - ST - ZIP		
TITLE	D	DELETE	2.1 TITLE	•	L. Change M Additio
NAME	LINDSEY, JOHN		2.2 NAME		
STREET ADDRESS	6720-2 121ST AVE N		2.3 STREET ADDRESS		
C TY - ST - ZIF	LARGO FL	DELFTE	2. 4 CITY-ST-ZIP	***************************************	Change Addition
THTLE	DST DUDGELL LAUDA A	L) DECETE	3.1 TITLE		Change Additio
NAME	BURRELL, LAURA A		3.2 NAME	04 N.W. Main Stre	بلم
STREET ADDRESS	2548 INDIAN HILLS CT		10		
CITY - ST - ZIP TITLE	TITUSVILLE FL D	DELETE	34. CITY-ST-ZIP	collins, GA 3042	Change Additio
		E DETETE			En cuanda Fill soumo
NAME STREET ADDRESS	BURRELL, DAVID O. 25487 INDIAN HILLS CT.		4. 2 NAME 4.3 STREET ADDRESS	OY N.W. MAIN S	TREET
	TITUSVILLE FL			ollins, GA 3042	_
CHY-ST-ZIP TITLE	D D	DELETE	4.4 CITY - ST - ZIP 5.1 TITLE	UTTION OF COTA	Change Additio
NAME	SHAW, MARTHA L.	Anna Paris	5.2 NAME		
STREET ADDRESS	2660 GRADUATE CT		5.3 STREET ADDRESS		
OTY - ST - ZIP	ORLANDO FL		5.4 City-St-Zip		
TITLE		DELETE	6.1 1/TLE		Change Addition
NAME		_	6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY -ST-712			6.4 CITY-ST-ZIP		
14 I do bemby	cartify that the information supplied	with this filing does not qualify.		ed in Section 119 07/3/(i) Florida Statutos	I further certify that the

Tdo receive certify that the information supplied with this filling does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that am an officer or director of corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 stock 10 s