

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48446

FILED
Jan 10, 2011
Secretary of State

Entity Name: MESSENGER INTERNATIONAL, INC.

Current Principal Place of Business:

610 S. SANTA FE RIDGE DRIVE
PALMER LAKE, CO 80133 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 888
PALMER LAKE, CO 80133

New Mailing Address:

FEI Number: 59-3123555

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSON, LORAN A
5000 CULBREATH KEY WAY 4-203
TAMPA, FL 33611 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: PD
Name: BEVERE, JOHN P JR
Address: 610 S SANTA FE RIDGE DRIVE
City-St-Zip: PALMER LAKE, CO 80133 US

Title: VST
Name: BEVERE, LISA T
Address: 610 S SANTA FE RIDGE DRIVE
City-St-Zip: PALMER LAKE, CO 80133 US

Title: D
Name: MUNSEY, JEANNIE
Address: 610 S SANTA FE RIDGE DRIVE
City-St-Zip: PALMER LAKE, CO 80133 US

Title: SD
Name: JOHNSON, LORAN A
Address: 610 S SANTA FE RIDGE DRIVE
City-St-Zip: PALMER LAKE, CO 80133 US

Title: D
Name: TEGTMEIER, RICHARLD L ESQ
Address: 610 S SANTA FE RIDGE DRIVE
City-St-Zip: PALMER LAKE, CO 80133 US

Title: CFO
Name: RAMSAY, AARON S CPA
Address: 610 S SANTA FE RIDGE DRIVE
City-St-Zip: PALMER LAKE, CO 80133 US

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: AARON S. RAMSAY, CPA

CFO

01/10/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date