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NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # N9400001267

1. Corporation Name

DBF MISSIONS, INC.

Principa ^t	I.Place	of Busin	es
455 SCC	TI AND	ST	

2. Principal Place of Business

Suite, Apt. #, etc.

DUNEDIN FL 34696

Mailing Address

P O BOX 1468 **DUNEDIN F 34697-1468**

2a. Mailing Address

Suite, Apt. #, etc.

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FILED Jan 23, 1999 8:00am **Secretary of State**

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3. Date Incorporated or Qualifed

03/10/1994

4. FEI Number

Suite, Apt	i. #, eic.	Suite, Apr. #, etc.		59-3285280		t Applicable
22	4-	City & State			\$8.75 A	
City & Sta	City & State			5. Certifcate of Status Desired	Fee Red	
Zip	Country	Zip	Country	6. Election Campaign Financing	\$5.00	May Be
24	25	29	10	Trust Fund Contribution	Added to	o Fées
24	9. Name and Address of Curre	<u> </u>		10. Name and Address of New Register	d Agent	
·			81 Name			
0.111BBE	050005 !!		00 01	the and (D.O. Day Number in Not Accordable)		
CAMPBELL, GEORGE H		82 Street Ad	dress (P.O. Box Number is Not Acceptable)			
	KESIDE DRIVE		83			
DUNEDIN	N FL 34698					
			84 City	_	85 Zip C	od e
				rporation submits this statement for the purpose		rogistered
agent. I	am familiar with, and accept the oblig	gations of, Section 617.0503, Fiorit	3 Statutes. Registered Agent signature requirements	attion's board of directors. I hereby accept the ap	.	
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS		
TITLE	SD	☐ DELETE	1.1 TITLE		☐ Change	☐ Additio
NAME	SMITH, JOHN C. JR		1.2 NAME			
STREET ADDRES	s 306 PALMETTO LANE		1.3 STREET ADDRESS			
CITY-ST-ZIP	LARGO FL		1.4 CfTY-ST-ZfP			
TITLE	PD	DELETE	2.1 TITLE		☐ Change	Addition
NAME	JONES, DONALD S		2.2 NAME	•		
STREET ADDRES			2.3 STREET ADDRESS			
CITY-ST-ZIP	DUNEDIN FL		2. 4 CITY-ST-ZIP			
TITLE	D	☐ DELETE	3.1 TITLE		Change	☐ Additio
NAME	MCCUTCHEON, MARK K		3.2 NAME			
STREET ADDRES	s 234 LYNDHURST ST		3.3 STREET ADDRESS			
CITY-ST-ZIP	DUNEDIN FL		3.4. CITY-ST-ZIP			
TITLE	TD	☐ DELETE	4.1 TITLE		Change	☐ Addition
NAME	TUCK, DENNIS A		4. 2 NAME			
STREET ADDRES	ss 2830 DEER HOUND WAY		4.3 STREET ADDRESS			
CITY-ST-ZIP	PALM HARBOR FL		4.4 CiTY-ST-ZIP			
TITLE	D	☐ DELETE	5.1 TITLE		☐ Change	Addition
NAME	GUNN, WENDELL		5.2 NAME			
STREET ADDRES	ss 2351 MANGRUM DRIVE		5.3 STREET ADDRESS			
CITY-ST-ZIP	DUNEDIN FL		5.4 CITY-ST-ZIP			
TITLE	VD	☐ DELETE	6.1 TITLE		Change	Addition
NAME	SCHAFFER, DONALD R		6.2 NAME			
OTDEET ADDRES	*** * *** *** *** *** ***		6.3 STREET ADDRESS			

CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

STREET ADDRESS 250 C HIDDEN BROOK DR

PALM HARBOR FL

SIGNATURE: DENSIGNATURE REQUIREDA

Applied For