

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000001267

FILED
Apr 30, 2007
Secretary of State

Entity Name: DBF MISSIONS, INC.

Current Principal Place of Business:

455 SCOTLAND ST
DUNEDIN, FL 34698 US

New Principal Place of Business:

Current Mailing Address:

455 SCOTLAND ST.
DUNEDIN, FL 34698 US

New Mailing Address:

FEI Number: 59-3285280

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROWE, MARGARET R
455 SCOTLAND ST.
DUNEDIN, FL 34698 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 () Delete
Name: STONE, PAUL
Address: 2087 EDGEWATER DR., NO. C
City-St-Zip: CLEARWATER, FL 33755

Title: VD () Delete
Name: KREBS, LOIS
Address: 2751 REGENCY OAKS BLVD APT R211
City-St-Zip: CLEARWATER, FL 33759

Title: TD () Delete
Name: ROWE, MARGARET R
Address: 2336 SPICEWOOD CT
City-St-Zip: DUNEDIN, FL 34698

Title: SD () Delete
Name: AGNEW, WELCH
Address: 1240 WEYBRIDGE LANE
City-St-Zip: DUNEDIN, FL 34698

Title: D () Delete
Name: BOYNTON, SYLVIA
Address: 1429 STURBRIDGE COURT
City-St-Zip: DUNEDIN, FL 34698

Title: D () Delete
Name: DOYLE, FRANCES
Address: 1875 BARCELONA DR
City-St-Zip: DUNEDIN, FL 34698

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: () Change () Addition
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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 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: MARGARET R. ROWE

TD

04/30/2007

Electronic Signature of Signing Officer or Director

Date