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**NONPROFIT** CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMEN F STATE

Sandra B. Mor

Secretary of S

DIVISION OF CORPORTIONS

DOCUMENT # 1. Corporation Name N95000003400 (7)

FAR AND AWAY MISSIONS, INC.				
Principal Place of Business	Mailing Address	<del></del>	: ifitting: Ett illeft Berre dejat an	America maries amenda como mener america mare (mm.
111 SE 9TH COURT POMPANO BEACH FL 33060	111 SE 9TH COURT POMPANO BEACH FL 3	3060		
TOMINIO DENOTTE COO			3. Date Incorporated or Qualified 07/18/1995	DH.
2. Principal Place of Business	2a. Mailing Address	11517	4. FEI Number 06/7	568 - Applied For Not Applicable
21 11 5 E 9 5 C 5 C 5 C 5 C 5 C 5 C 5 C 5 C 5 C 5	Suite, Apt. # etc.	142	Certificate of Status Desired	\$8.75 Additional Fee Required
Sity & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23 Jompano Beach	28 Florence		Trust Fund Contribution	Added to Fees or intangible tax under s. 199.032,
24 33 040 25 Country CA	29 4/042	30 (SA	Florida Statutes	Yes No
9. Name and Address of Curren	t Registered Agent	81 Name	10. Name and Address of New	Vehistelen vänut
KELLY, W T		82 Street Add	ress (P.O. Box Number is Not Accept	able)
111 SE 9TH COURT		83 11	Scan A.	
POMPANO BEACH FL 33060		84 Cit 3		85 Zip Code
		1 38 0	upomo Beach	FL 30060
11. Pursuant to the provisions of Sections 617.0502 or registered agent, or both, in the State of Florid Country and Country the objections of Sections (1.5)	and 617.1508, Florida Statute la. Such change was authorize	es, the at≠e-named corpo ed by th∈orooration's boa	ration submits this statement for the a ard or directors. I hereby accept the a	ppointment as registered agent. I am
tarrilliar with, and accept the obligations 77, Section	on 67.0503, Florida Statutes.			218/96
SIGNATURE  Signature, typod or printed name of registered agent		TE Register! Agent signature require	ed when reinstating)	PATE DEFICERS AND DIRECTORS IN 12
12. OFFICERS AND	D DIRECTORS	13 11:ILE	ADDITIONS/CHANGES TO C	
12. OFFICERS AND THE TOW KEDLE P.		1 1.7LE 1.2 AME	ADDITIONS/CHANGES TO C	
MAME STREET ADDRESS  TOWN KELDEY P.  111 JE G. L.	I TO -	1 1.TLE 1.2 AME 1 3 TREET ADDRESS	ADDITIONS/CHANGES TO C	
MAME Tow Kally P.		1 1.TLE 1.2 AME 1 3 TREET ADDRESS	ADDITIONS/CHANGES TO C	
THE TOW Kally P.  STREET ADDRESS  CITY-SI-ZIP  TOW Kally P.  CONTROL P.  TOWN Kally	is Dent John 330.	11.TUE 12 AME 13 REET ADORESS 14 TY-ST-ZIP 2 TITLE 2 2 ME	ADDITIONS/CHANGES TO C	☐ Change ☐ Addition
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TITLE  NAME STREET ADDRESS CITY-ST-ZIP  TITLE  NAME  LITS'E 974  TITLE  NAME	is Devet 1300	11.TUE 12 MME 13 FREET ADORESS 14 1Y-ST-ZIP 21 FLE 22 MME 23 MEET ADDRESS 2 TY-ST-ZIP 3 LE 3 ME	ADDITIONS/CHANGES TO C	☐ Change ☐ Addition☐ Change ☐ Addition☐ Change ☐ Addition☐
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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER ON DIRECTOR

2/8/96 606-371-6300