

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000003505

FILED  
May 01, 2007  
Secretary of State

Entity Name: MISSIONAIR, INC.

**Current Principal Place of Business:**

4191 DEER TRAIL  
MIDDLEBURG, FL 32068 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 562  
MIDDLEBURG, FL 32050 US

**New Mailing Address:**

FEI Number: 59-3044461      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

HELMER, SANDRA L  
4191 DEER TRAIL  
MIDDLEBURG, FL 32068 US

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: VD ( ) Delete  
Name: WOOD, ANDY J.  
Address: PO BOX 670  
City-St-Zip: NEWTON, AL 36352

Title: PD ( ) Delete  
Name: HELMER, SANDRA L  
Address: 4191 DEER TRAIL  
City-St-Zip: MIDDLEBURG, FL 32068

Title: STD ( ) Delete  
Name: HELMER, AMANDA  
Address: PO BOX 421379  
City-St-Zip: KISSIMMEE, FL 34742

**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:

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: SANDRA L HELMER

PD

05/01/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date