

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000002195

Entity Name: MISSION TATARSTAN, INC.

FILED
Apr 30, 2005
Secretary of State

Current Principal Place of Business:

2524 LANCASTER DR.
SUN CITY CENTER, FL 33573

New Principal Place of Business:

4175 BONNY OAKS DR.
#1006
CHATTANOOGA, TN 37416

Current Mailing Address:

2524 LANCASTER DR.
SUN CITY CENTER, FL 33573

New Mailing Address:

4175 BONNY OAKS DR.
#1006
CHATTANOOGA, TN 37416

FEI Number: 59-3445824

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCKNIGHT, J. SCOTT
2524 LANCASTER DRIVE
SUN CITY CENTER, FL 33573 US

Name and Address of New Registered Agent:

MCKNIGHT, J. SCOTT
4175 BONNY OAKS DR.
#1006
CHATTANOOGA, TN, FL 37416 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:

04/30/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DVT () Delete
Name: MCKNIGHT, J. SCOTT
Address: 2524 LANCASTER DRIVE
City-St-Zip: SUN CITY CENTER, FL 33573

Title: DP () Delete
Name: HARRIS, DANIEL B
Address: 2248 E. OAKLAND
City-St-Zip: HEMET, CA 92544

Title: DS () Delete
Name: WATSON, CLIFFORD H
Address: 44200 PALM AVENUE
City-St-Zip: HEMET, CA 92544

Title: D () Delete
Name: HIRES, WILLIAM F
Address: 1809 W SITKA ST
City-St-Zip: TAMPA, FL 33604

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DVT (X) Change () Addition
Name: MCKNIGHT, J. SCOTT
Address: 4175 BONNY OAKS DR., #1006
City-St-Zip: CHATTANOOGA, TN 37416

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 for the exemption stated in Section 119.07(3)(i), 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: J. SCOTT MCKNIGHT

DVT

04/30/2005

Electronic Signature of Signing Officer or Director

Date