2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2008
Secretary of State

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Entity Name: AMERICAN INTERNATIONAL MISSIONS, INC.

Current Principal Place of Business:

51B BEACHOMBER WAY
SAINT AUGUSTINE, FL 32084 US

New Principal Place of Business:

Current Mailing Address:

51B BEACHOMBER WAY
SAINT AUGUSTINE, FL 32084 US

New Mailing Address:

FEI Number: 59-3082183 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FRIESE, GLEN E
51B BEACHCOMBER WAY
SAINT AUGUSTINE, FL 32084 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: DS ( ) Delete
Name: FRIESE, PEGGY
Address: 51B BEACHCOMBER WAY
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: VD ( ) Delete
Name: ULMER, SARAH
Address: 132 LAUREN PLACE
City-St-Zip: ST AUGUSTINE, FL 32080

Title: P ( ) Delete
Name: FRIESE, GLEN E
Address: 51B BEACHCOMBER WAY
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: VP ( ) Delete
Name: VERSAILLES, ALISON G
Address: 14670 SW 132ND CT
City-St-Zip: MIAMI, FL 33186

Title: DT ( ) Delete
Name: KNIGHT, AC K III
Address: US 17 BRUNSWICK GA
City-St-Zip: BRUNSWICK, GA 31521

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VD (X) Change ( ) Addition
Name: ULMER, SARAH
Address: 209 17TH STREET
City-St-Zip: ST AUGUSTINE, FL 32084

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

Title: VP (X) Change ( ) Addition
Name: VERSAILLES, ALISON G
Address: 13572 SW 144TH TERRACE
City-St-Zip: MIAMI, FL 33186

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: PEGGY J FRIESE DS 04/09/2008
Electronic Signature of Signing Officer or Director Date