2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006488

FILED Mar 08, 2006 Secretary of State

Entity Name: KWELI INTERNATIONAL MISSION, INC.

Current Principal Place of Business: New Principal Place of Business: 319 ANDERSON ST., N.E. LAKE PLACID, FL 33852 **Current Mailing Address: New Mailing Address:** 319 ANDERSON ST., N.E. LAKE PLACID, FL 33852 FEI Number: 65-0805298 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LUNDY, JOAN 319 ANDERSON ST., N.E. US LAKE PLACID, FL 33852 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition GREY, JESSE J III Name: Name: PO BOX 3286 Address: Address: City-St-Zip: LAKE PLACID, FL 33862 City-St-Zip: Title: Title: () Delete () Change () Addition GREY, WINIFRED B Name: Name: Address: PO BOX 3286 Address: LAKE PLACID, FL 33862 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition LUNDY, JOAN Name: Name: 319 ANDERSON ST., N.E. Address: Address: City-St-Zip: LAKE PLACID, FL 33852 City-St-Zip: Title: () Delete Title: () Change () Addition Name: LUNDY, RICHARD J Name: Address: 319 ANDERSON ST., N.E. Address: City-St-Zip: LAKE PLACID, FL 33852 City-St-Zip: Title: () Delete Title: () Change () Addition PASTOR DANNY MILUTIN, Name: Name: 3401 MIDDLE RD Address: Address: City-St-Zip: HIGHLAND, MI 48357 City-St-Zip: Title: () Delete Title: () Change () Addition PASTOR KELLY VARNER. Name: Name: Address: P O BOX 785 Address: RICHLAND, NC 28574 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JOAN Y. LUNDY ST 03/08/2006