

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003941

FILED
May 01, 2005
Secretary of State

Entity Name: HOME MISSION INC.

Current Principal Place of Business:

806 NW 2ND ST
DANIA, FL 33004

New Principal Place of Business:

Current Mailing Address:

806 NW 2ND ST
DANIA, FL 33004

New Mailing Address:

FEI Number: 65-0848961 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:

MCSWAIN, OSIE L
806 NW 2ND STREET
DANIA, FL 33004 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: D () Delete
Name: MCSWAIN, OSIE L
Address: 806 NW 2ND ST
City-St-Zip: DANIA, FL 33004

Title: D () Delete
Name: TINGLOF, ROBERT
Address: 13060 NW 3 ST
City-St-Zip: PLANTATION, FL 33325

Title: D () Delete
Name: MOORE, FANNY
Address: 745 FOSTER RD
City-St-Zip: HALLANDALE, FL 33009

Title: D () Delete
Name: WILLIAMS, TRACY
Address: 4601 NW 3 AVE
City-St-Zip: POMPANO BEACH, FL 33064

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:

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: OSIE MCSWAIN

MIN.

05/01/2005

Electronic Signature of Signing Officer or Director

Date