

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Aug 16, 2004 8:00 am
Secretary of State

08-16-2004 90019 014 ****66.25

DOCUMENT # N99000003243

1. Entity Name

MERCY MISSION, INC.



Principal Place of Business

3440 TRAIL DAIRY CIRCLE
CHURCH
N.A. FORT MYERS FL 33917

Mailing Address

3440 TRAIL DAIRY CIRCLE
N.A. MYERS FL 33917

54068437



MOORE

CR2E037 (4/04)

2. Principal Place of Business

CHURCH

3. Mailing Address

153 LAS PALMAS BLVD.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

N. Ft. Myers

City & State

N.A. MYERS, FLA

City & State

FIA.

Zip
33903

Country
USA

Zip
33903

Country
USA

4. FEI Number

65-0916065

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

ANN MORROW DOHERY S.F.O.
3440 TRAIL DAIRY CIRCLE
N. FT. MYERS FL 33903

7. Name and Address of New Registered Agent -

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE DP
NAME DOHERTY, ANNE
STREET ADDRESS 3440 TRAIL DAIRY CIRCLE
CITY-ST-ZIP N. FT. MYERS FL 33903 ☐ Delete

TITLE DS
NAME RIZZARDI, JOANNE
STREET ADDRESS 3440 TRAIL DAIRY CIRCLE
CITY-ST-ZIP N. FT. MYERS FL 33903 ☐ Delete

TITLE T
NAME SANTIAGO, SARAH
STREET ADDRESS 1341 SANDTRAP DRIVE
CITY-ST-ZIP FORT MYERS FL 33919 ☐ Delete

TITLE DT
NAME GREEN, GERALDINE
STREET ADDRESS 12031 NW HARRY ST
CITY-ST-ZIP BOKEELIA FL 33922 ☐ Delete

TITLE S
NAME LUDDEN, GLORIA
STREET ADDRESS 5491 SAN LUIS
CITY-ST-ZIP FORT MYERS FL 33917 ☐ Delete

TITLE C
NAME PEROG, CATHERINE
STREET ADDRESS 2419 WOODLAND BLVD
CITY-ST-ZIP FORT MYERS FL 33907 ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE DP ☒ Change ☐ Addition
NAME DOHERTY, ANNE
STREET ADDRESS 153 LAS PALMAS BLVD
CITY-ST-ZIP N FT MYERS FL 33903

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-7-04

Date

259-543-8881

Daytime Phone #