

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 701484

**Entity Name:** MISSIONARY FLIGHTS AND SERVICE INC

**Current Principal Place of Business:**

3170 AIRMANS DRIVE  
FORT PIERCE, FL 34946

**Current Mailing Address:**

3170 AIRMANS DRIVE  
FORT PIERCE, FL 34946 US

**FEI Number:** 23-7199063

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

KARABENSH, JOSEPH H  
5545 W 1ST SQ SW  
VERO BEACH, FL 32968 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:** JOSEPH H KARABENSH

04/05/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            KARABENSH, JOSEPH H  
Address        5545 W 1ST SQ SW  
City-State-Zip: VERO BEACH FL 32968

Title            VP  
Name            CAMPBELL, LAWRENCE B  
Address        443 23RD ST SE  
City-State-Zip: VERO BEACH FL 32962

Title            DIRECTOR  
Name            MCEWEN, DAVID DR.  
Address        4074 LAKEPUR CIR N  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title            DIRECTOR  
Name            GIDDENS, RONALD DR.  
Address        10504 DENOEU RD  
City-State-Zip: BOYNTON BEACH FL 33472

Title            DIRECTOR  
Name            BRADLEY, DALE  
Address        4241 WOOD FOREST DR  
City-State-Zip: ROCK HILL SC 29732

Title            DIRECTOR  
Name            FERRIN, RICK L  
Address        4588 CAVE SPRING RD. SW  
City-State-Zip: ROME GA 30161

Title            DIRECTOR  
Name            MCLAUGHLIN, FRANK  
Address        60 LA VILLA WAY  
City-State-Zip: FORT PIERCE FL 34951

Title            DIRECTOR  
Name            SNOOK, RICHARD  
Address        7504 PASO ROBLES BLVD  
City-State-Zip: FORT PIERCE FL 34951

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*I hereby 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 all other like empowered.*

**SIGNATURE:** JOSEPH KARABENSH

PRESIDENT

04/05/2023

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title CHAIRMAN  
Name CROWE, RANDY  
Address 106 OAKMONT LN  
City-State-Zip: NEW SMYRNA BEACH FL 32168

Title SECRETARY/TREASURER  
Name SANDS, ROGER  
Address 3405 ATLANTIC BLVD  
City-State-Zip: VERO BEACH FL 32960

Title DIRECTOR  
Name STAUFFER, DENNIS  
Address 3974 S KANSAS RD  
City-State-Zip: APPLE CREEK OH 44636

Title DIRECTOR  
Name MARK, STOLTZFUS  
Address 3141 S KANSAS RD  
City-State-Zip: APPLE CREEK OH 44606

Title DIRECTOR  
Name HAZLEWOOD, CYNTHIA  
Address 147 ANCHOR DR.  
City-State-Zip: VERO BEACH FL 32963-2941

Title VC  
Name MARTIN, HAROLD  
Address 7621 SE DOVE ST  
City-State-Zip: HOBE SOUND FL 33455