2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768748

Entity Name: MISSIONARY VENTURES INTERNATIONAL, INC.

Sep 20, 2019 **Secretary of State** 5144405267CC

FILED

Current Principal Place of Business:

5144 S ORANGE AVE. ORLANDO, FL 32809

Current Mailing Address:

P.O. BOX 593550

ORLANDO. FL 32859-3550 US

FEI Number: 59-2321060 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SNELL, WILLIAM A JR. 5144 S ORANGE AVE ORLANDO, FL 32809 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: WILLIAM A SNELL JR 09/20/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

City-State-Zip:

Title **PRESIDENT** Title DIRECTOR

SNELL, WILLIAM A MCFADDEN, DOUGLAS Name Name 5144 S. ORANGE AVENUE 5144 S. ORANGE AVENUE Address Address City-State-Zip: ORLANDO FL 32809 ORLANDO FL 32809

Title D Title **TREA**

Name EGGERT, EDITH Name HALL, GARY

Address 5144 S. ORANGE AVENUE Address 5144 S. ORANGE AVENUE ORLANDO FL 32809 City-State-Zip: City-State-Zip: ORLANDO FL 32809

Title DIRECTOR Title D

Name POWELL, CHARLES Name WILLIAMS, GLENN Address 5144 S ORANGE AVE. 5144 S. ORANGE AVENUE Address City-State-Zip: ORLANDO FL 32809 ORLANDO FL 32809 City-State-Zip:

Title DIRECTOR Title **SECRETARY** Name OGDEN, JOHN MCDANIEL, PETER Name

5144 S ORANGE AVE. Address 5144 S ORANGE AVE. Address City-State-Zip: ORLANDO FL 32809 City-State-Zip: ORLANDO FL 32809

Continues on page 2

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.

09/20/2019 **PRESIDENT** SIGNATURE: WILLIAM A. SNELL JR

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR
Name BREWER, KURT

Address 5144 S ORANGE AVE.

City-State-Zip: ORLANDO FL 32809

Title DIRECTOR

NameREED, BRANDONAddress5144 S ORANGE AVE.City-State-Zip:ORLANDO FL 32809

Title DIRECTOR
Name TUBBS, BRAD

Address 5144 S ORANGE AVE. City-State-Zip: ORLANDO FL 32809