

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006790

Entity Name: ADVENT MISSION OUTREACH SERVICES, INC.**Current Principal Place of Business:**211 HOWARD BLVD
LONGWOOD, FL 32750**Current Mailing Address:**211 HOWARD BLVD
LONGWOOD, FL 32750**FEI Number:** 06-1700847**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**TONY, PUN
211 HOWARD BLVD
LONGWOOD, FL 32750 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**Officer/Director Detail :**

Title	P
Name	EILEEN, PUN
Address	211 HOWARD BLVD
City-State-Zip:	LONGWOOD FL 32750

Title	VST
Name	PUN, TONY
Address	1934 LONGWOOD LAKE MARY RD
City-State-Zip:	LONGWOOD FL 32750-4613

Title	D
Name	WILSON, ASU
Address	75 EAST LOOP RD STE 125
City-State-Zip:	STONY BROOK NY 11790

Title	A.S.
Name	ROBSON, EILEEN
Address	196 BURNESIDE
City-State-Zip:	KENDAL 6AB L-A9

Title	M
Name	LIU, JUAN MANAGER
Address	LEIFENG LU 70-1# 2HAOLOU 3 DANYUAN 401
City-State-Zip:	FUSHUN CITY LIAONING 11300-1

Title	M
Name	PUN, JONATHAN MOFFICER
Address	4550 KAWILLA CREST PL
City-State-Zip:	WINTER PARK FL 32792

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: TONY PUN**REGISTER AGENT****04/18/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date