

2015 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000000245

Entity Name: MISSION NETWORK ACTIVITIES USA, INC.**Current Principal Place of Business:**8825 FULAHM COURT
CUMMING, GA 30041**Current Mailing Address:**8825 FULHAM COURT
CUMMING, GA 30041 US**FEI Number:** 06-1500537**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPDIRECT AGENTS
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 PRESIDENT, DIRECTOR
Name CONNOR, JOHN
Address 8825 FULHAM COURT
City-State-Zip: CUMMING GA 30041

Title VP, D
Name NOHRDEN, NANCY
Address 951 PEACHTREE PARKWAY
City-State-Zip: CUMMING GA 30041

Title STD
Name MEEHAN, KEVIN
Address 815 BOSTON POST ROAD
City-State-Zip: RYE NY 10580

Title D
Name KNUTH, MARIA
Address 60 AUSTIN AVENUE
City-State-Zip: GREENVILLE RI 02828

Title DIRECTOR
Name DARBELLAY, GLORY
Address 100 N. LAVERGNE
City-State-Zip: NORTHLAKE IL 60630

Title DIRECTOR
Name REIFF, MICHELLE
Address 751 WEST DRAHNER ROAD
City-State-Zip: OXFORD MI 48371

Title DIRECTOR
Name WILLIAMS, MIKE
Address 8825 FULHAM COURT
City-State-Zip: CUMMING GA 30041

Title DIRECTOR
Name GARRETT, DONNA
Address 8825 FULHAM COURT
City-State-Zip: CUMMING GA 30041

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: KEVIN MEEHAN**SECRETARY****01/12/2015**_____
Electronic Signature of Signing Officer/Director Detail_____
Date