

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000006600

FILED
May 11, 2012
Secretary of State

Entity Name: THE POTTER'S LOVE CARING AGENT INC.

Current Principal Place of Business:

3520 ST JOHNS BLUFF RD
SUITE 4
JACKSONVILLE, FL 32224

New Principal Place of Business:

Current Mailing Address:

3520 ST JOHNS BLUFF RD
SUITE 4
JACKSONVILLE, FL 32224

New Mailing Address:

FEI Number: 27-0542339

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DADA, OLUFEMI M
8116 SUMMER GATE CT
JACKSONVILLE, FL 32256 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P
Name: DADA, FRANCETTA S
Address: 8116 SUMMER GATE CT
City-St-Zip: JACKSONVILLE, FL 32256

Title: V
Name: DADA, OLUFEMI M
Address: 8116 SUMMER GATE CT
City-St-Zip: JACKSONVILLE, FL 32256

Title: ST
Name: LYNCH, ROSETTE
Address: 11350 HENDON DR
City-St-Zip: JACKSONVILLE, FL 32246

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: OLUFEMI M DADA

VP

05/11/2012

Electronic Signature of Signing Officer or Director

Date