

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000001003

FILED
Jul 07, 2008
Secretary of State

Entity Name: LIVING STONES INTERNATIONAL, INC.

Current Principal Place of Business:

3420 CONNELL DR.
PENSACOLA, FL 32503

New Principal Place of Business:

1575 PAUL RUSSELL ROAD
SUITE 502
TALLAHASSEE, FL 32301

Current Mailing Address:

P.O. BOX 2322
PENSACOLA, FL 32513

New Mailing Address:

P.O. BOX 6747
TALLAHASSEE, FL 32314

FEI Number: 20-8309980 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

WEAVER, WESLEY J.
609 DUNDEE DR.
PENSACOLA, FL 32507 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: DP () Delete
Name: MONTGOMERY, GARY
Address: 3420 CONNELL DR.
City-St-Zip: PENSACOLA, FL 32503

Title: DS () Delete
Name: RANDALL, WAYNE
Address: 2701 N. 20 AVE.
City-St-Zip: PENSACOLA, FL 32503

Title: DT () Delete
Name: DEMPS, WILLIE SR.
Address: 2480 TRONJO CIR.
City-St-Zip: PENSACOLA, FL 32503

Title: D () Delete
Name: BRUNDIDGE, DARRYL
Address: 5404 SUN VALLEY DR.
City-St-Zip: PENSACOLA, FL 32505

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: MONTGOMERY, GARY
Address: 1575 PAUL RUSSELL ROAD, #502
City-St-Zip: TALLAHASSEE, FL 32301

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DVP () Change (X) Addition
Name: JOSEPHINE, GAMBOA
Address: 1575 PAUL RUSSELL ROAD, #502
City-St-Zip: TALLAHASSEE, FL 32301

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: GARY MONTGOMERY

DP

07/07/2008

Electronic Signature of Signing Officer or Director

_____ Date