

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000001003

FILED
Apr 10, 2012
Secretary of State

Entity Name: LIVING STONES INTERNATIONAL, INC.

Current Principal Place of Business:

604 EUGENIA STREET
TALLAHASSEE, FL 32310 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 6747
TALLAHASSEE, FL 32314 US

New Mailing Address:

FEI Number: 20-8309980 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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: PD
Name: MONTGOMERY, GARY
Address: PO BOX 6747
City-St-Zip: TALLAHASSEE, FL 32310 US

Title: SD
Name: DAVIS, JOSEPH
Address: 4345 CRUMP ROAD
City-St-Zip: TALLAHASSEE, FL 32309 US

Title: D
Name: MARTIN, KEITH
Address: 14456 DOVER FOREST DRIVE
City-St-Zip: ORLANDO, FL 32828 US

Title: D
Name: ALLEN, JAMIL
Address: 5675 VESTAVIA LN
City-St-Zip: PENSACOLA, FL 32526 US

Title: VPD
Name: JOSEPHINE, GAMBOA
Address: PO BOX 6747
City-St-Zip: TALLAHASSEE, FL 32314 US

Title: D
Name: CROMARTIE, CLAUDETTE
Address: 1292 MT. SINAI ROAD
City-St-Zip: TALLAHASSEE, FL 32311 US

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: GARY MONTGOMERY

PRES

04/10/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date