# 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0400008252

Entity Name: SHATTERING DARKNESS INC.

FILED Feb 23, 2015 Secretary of State CC1467258530

# **Current Principal Place of Business:**

180 BROOKESTONE POINT FAYETTEVILLE. GA 30215

# **Current Mailing Address:**

180 BROOKESTONE POINT FAYETTEVILLE, GA 30215

FEI Number: 20-1785476 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

FREY, JULIA L 215 NORTH EOLA DRIVE ORLANDO, FL 32801 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.

Title

SIGNATURE:

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title D

Name DECKER, CHERYL Name WALLACE, LINDA

Address 10664 LAKE MINEOLA SHORES Address 180 BROOKESTONE PT

City-State-Zip: CLERMONT FL 34711 City-State-Zip: FAYETTEVILLE GA 30215

Title S Title PRESIDENT
Name KORT, NANCY Name MITCHELL, BILL

Address 12321 WATER OAK DRIVE Address 3000 S JOHN YOUNG PARKWAY

City-State-Zip: FT. WORTH TX 76244 City-State-Zip: ORLANDO FL 32805

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: LINDA D WALLACE

**DIRECTOR** 

02/23/2015