

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000010008

**Entity Name:** ZOE INTERNATIONAL ORGANIZATION, INC.

**FILED**  
**Mar 20, 2020**  
**Secretary of State**  
**7527363051CC**

**Current Principal Place of Business:**

755 LAKE MONROE RD  
470282  
LAKE MONROE , FL 32747

**Current Mailing Address:**

P.O. BOX 470282  
LAKE MONROE, FL 32747 US

**FEI Number: APPLIED FOR**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

DENNIS, K DR  
755 LAKE MONROE RD  
470282  
LAKE MONROE, FL 32747 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  
Name            WILLINGHAM-DENNIS, KARIN N  
Address        755 LAKE MONROE RD  
                  470282  
City-State-Zip: LAKE MONROE FL 32747

Title            BISHOP  
Name            DENNIS, N LJR  
Address        755 LAKE MONROE RD  
                  470282  
City-State-Zip: LAKE MONROE FL 32747

Title            VP  
Name            JONES, JENNIFER  
Address        755 LAKE MONROE RD  
                  470282  
City-State-Zip: LAKE MONROE FL 32747

Title            APOSTLE  
Name            HILL, L DR  
Address        755 LAKE MONROE RD  
                  470282  
City-State-Zip: LAKE MONROE FL 32747

Title            DIRECTOR  
Name            WILLINGHAM, K  
Address        755 LAKE MONROE RD  
                  470282  
City-State-Zip: LAKE MONROE FL 32747

Title            DIRECTOR  
Name            DENNIS, K  
Address        755 LAKE MONROE RD  
                  470282  
City-State-Zip: LAKE MONROE FL 32747

*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: KARIN N W DENNIS**

**PRESIDENT**

**03/20/2020**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date