

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010008

Entity Name: ZOE INTERNATIONAL ORGANIZATION, INC.**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