

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000001003

FILED
Mar 01, 2018
Secretary of State
CC4201275697

Entity Name: LIVING STONES INTERNATIONAL, INC.

Current Principal Place of Business:

1341 CROSS CREEK CIRCLE
TALLAHASSEE, FL 32301

Current Mailing Address:

P.O. BOX 6747
TALLAHASSEE, FL 32314 US

FEI Number: 20-8309980

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MONTGOMERY, GARY
822 CALIFORNIA STREET
TALLAHASSEE, FL 32304 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: GARY MONTGOMERY

03/01/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name MONTGOMERY, GARY
Address PO BOX 6747
City-State-Zip: TALLAHASSEE FL 32314

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

Title DIRECTOR
Name CONSTANTINO-BROWN, LORI
Address 2145 METROCENTER BLVD.
350
City-State-Zip: ORLANDO FL 32835

Title DIRECTOR
Name WILLIAMS, ALAN
Address 1201 STONEY CREEK WAY
300
City-State-Zip: TALLAHASSEE FL 32302

Title CHAIRMAN, DIRECTOR
Name PATE, TENA
Address 1948 QUEENSWOOD DRIVE
City-State-Zip: TALLAHASSEE FL 32303

Title DIRECTOR
Name HAMILTON, SEWARD PHD
Address PO BOX 214
City-State-Zip: LLOYD FL 32337

Title DIRECTOR
Name HUNT, VINCENT
Address 80 COUNTRY WAY
City-State-Zip: CRAWFORDVILLE FL 32327

Title DIRECTOR
Name OUTLAW, STEVE
Address 234 EAST SEVENTH AVENUE
City-State-Zip: TALLAHASSEE FL 32303

Continues on page 2

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

PRESIDENT

03/01/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name SIMMONS, LARRY
Address 220 SLASH CIRCLE
City-State-Zip: MIDWAY FL 32343

Title DIRECTOR
Name THOMAS, ANDY
Address 1203 GARDENIA DRIVE
City-State-Zip: TALLAHASSEE FL 32312

Title DIRECTOR
Name WILLIAMS, ALAN
Address 1202 STONY CREEK WAY
City-State-Zip: TALLAHASSEE FL 32302