

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000006600

Entity Name: THE POTTER'S LOVE CARING AGENT INC.

Current Principal Place of Business:

3520 ST JOHNS BLUFF RD
SUITE 4
JACKSONVILLE, FL 32224

Current Mailing Address:

8116 SUMMER GATE CT
JACKSONVILLE, FL 32256 US

FEI Number: 27-0542339

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

DADA, OLUFEMI M
8116 SUMMER GATE CT
JACKSONVILLE, FL 32256 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 P
Name DADA, FRANGETTA S
Address 8116 SUMMER GATE CT
City-State-Zip: JACKSONVILLE FL 32256

Title V
Name DADA, OLUFEMI M
Address 8116 SUMMER GATE CT
City-State-Zip: JACKSONVILLE FL 32256

Title ST
Name DADA, OLUFEMI G
Address 8116 SUMMER GATE CT
City-State-Zip: JACKSONVILLE FL 32256

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: OLUFEMI M DADA

VP

05/01/2013

Electronic Signature of Signing Officer/Director Detail

Date