

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000010404

Entity Name: INNER JOURNEY, A CENTER FOR SPIRITUAL EVOLVEMENT,
INCORPORATED**FILED**
Mar 22, 2013
Secretary of State
CC1423999706**Current Principal Place of Business:**10935 SE 177TH PLACE
SUITE 504
SUMMERFIELD, FL 34491**Current Mailing Address:**4654 SLOEWOOD COURT
MOUNT DORA, FL 32757**FEI Number: 27-4827843****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**MURPHY, JANIS
4654 SLOEWOOD COURT
MOUNT DORA, FL 32757 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	PD
Name	MURPHY, JANIS
Address	4654 SLOEWOOD COURT
City-State-Zip:	MOUNT DORA FL 32757

Title	DIR
Name	VISSER, FRANCES
Address	3754 AUBURNDALE AVENUE
City-State-Zip:	THE VILLAGES FL 32162

Title	DIR
Name	MYERS, PAT
Address	17961 SE 106TH TERRACE
City-State-Zip:	SUMMERFIELD FL 34491

Title	DIR
Name	MURPHY, JAMES A
Address	4654 SLOEWOOD COURT
City-State-Zip:	MOUNT DORA FL 32757

Title	DIR
Name	SHAFT, LIBBY
Address	17678 SE 106TH AVENUE
City-State-Zip:	SUMMERFIELD FL 34491

Title	DIR
Name	ROLPH, FRANCES
Address	1609 EASTOVER TERRACE
City-State-Zip:	THE VILLAGES FL 32162

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: JANIS MURPHY**PD****03/22/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date