

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K56184

Entity Name: WEST OF EDEN, INC.**Current Principal Place of Business:**824 N. HIGHLAND AVE.
ORLANDO, FL 32803**Current Mailing Address:**824 N. HIGHLAND AVE.
ORLANDO, FL 32803**FEI Number:** 59-2929949**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WALTER N. CARPENTER, JR.
824 N. HIGHLAND AVE.
ORLANDO, FL 32803 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 D
Name EVANS, ARTHUR F
Address 112 EAST BROADWAY
City-State-Zip: OVIEDO FL 32765Title D
Name EVANS, CHARLES W
Address 112 EAST BROADWAY
City-State-Zip: OVIEDO FL 32765Title D
Name EVANS, DAVID L
Address 112 EAST BROADWAY
City-State-Zip: OVIEDO FL 32765Title D
Name EVANS, JOHN W JR.
Address 112 EAST BROADWAY
City-State-Zip: OVIEDO FL 32765Title D
Name CARPENTER, WALTER N JR.
Address 824 N. HIGHLAND AVENUE
City-State-Zip: ORLANDO FL 32765

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: WALTER N CARPENTER JR**DIRECTOR****01/16/2018**_____
Electronic Signature of Signing Officer/Director Detail_____
Date