## 2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED May 09, 2012 **DOCUMENT# 757417** Secretary of State

Entity Name: ZOE UNIVERSITY, INCORPORATED

**Current Principal Place of Business: New Principal Place of Business:** 

6504 ARLINGTON RD.

JACKSONVILLE, FL 32211 US

**Current Mailing Address: New Mailing Address:** 

P. O. BOX 8435

JACKSONVILLE, FL 32239 US

FEI Number: 59-2103287 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

POWELL, KEITH G DR EVANS, LEWIS T 6504 ARLINGTON ROAD 350 ROSA COURT

US ST AUGUSTINE, FL 32086 JACKSONVILLE, FL 32211 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.

05/09/2012 SIGNATURE: LEWIS T. EVANS

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

FIORENTINO, JUDY Name: Address: 6733 HEIDI RD

City-St-Zip: JACKSONVILLE, FL 32277

Title: S/D

Name: BAILEY, ROSE

Address: 8365 N BORDEAU AVENUE City-St-Zip: JACKSONVILLE, FL 32211

Title:

STOREY, STAN Name:

207 MEADOWFIELD BLUFF RD Address:

City-St-Zip: YULEE, FL 32097

Title:

Name: EVANS, LEWIS T Address: 350 ROSA COURT

City-St-Zip: ST. AUGUSTINE, FL 32086

Title:

PATTEN, KATHY F Name: 11230 MCCORMICK ROAD Address: City-St-Zip: JACKSONVILLE, FL 32225

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: JUDY FIORENTINO P/D 05/09/2012