

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F09000003660

**FILED**  
**Feb 01, 2011**  
**Secretary of State**

**Entity Name:** UNFOLDMENT, INC.

**Current Principal Place of Business:**

3709 SE 18TH PLACE  
CAPE CORAL, FL 33904

**New Principal Place of Business:**

**Current Mailing Address:**

3709 SE 18TH PLACE  
CAPE CORAL, FL 33904

**New Mailing Address:**

**FEI Number:** 52-1100325

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MORTEN, MARLENE (KEMI)  
3709 SE 18TH PLACE  
CAPE CORAL, FL 33904 US

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

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

**OFFICERS AND DIRECTORS:**

**Title:** PCD  
**Name:** MORTEN, KEMI  
**Address:** 3709 SE 18TH PLACE  
**City-St-Zip:** CAPE CORAL, FL 33904

**Title:** VCVD  
**Name:** DAVIS, FANIA DR.  
**Address:** 4541 SEQUOYAH DRIVE  
**City-St-Zip:** OAKLAND, CA

**Title:** SD  
**Name:** HUGHES, HAYWOOD  
**Address:** 3709 SE 18TH PLACE  
**City-St-Zip:** CAPE CORAL, FL 33904

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:** MARLENE (KEMI) MORTEN

MS.

02/01/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date