2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 28, 2008
Secretary of State

DOCUMENT# N01000006562

Entity Name: ZOE MINISTRIES INTERNATIONAL, INC.

Current Principal Place of Business:

84 DEVON LANE
MARSTON MILLS, MA 02648

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1892
HYANNIS, MA 02601

New Mailing Address:

84 DEVON LANE
MARSTON MILLS, MA 02648

FEI Number: 30-0062833 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MAROTTA, JEFF
4981 NW 54TH STREET
COCONUT CREEK, FL 33073 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:	PD	( ) Delete
Name:	MAROTTA, JEFREY	
Address:	P.O. BOX 1892	
City-St-Zip:	HYANNIS, MA 02601	
Title:	DV	( ) Delete
Name:	MAROTTA, CIRENE	
Address:	P.O. BOX 1892	
City-St-Zip:	HYANNIS, MA 02601	
Title:	SD	( ) Delete
Name:	WALDECK, JOAO P	
Address:	P.O. BOX 1892	
City-St-Zip:	HYANNIS, MA 02601	
Title:	TD	( ) Delete
Name:	CULLEN, THOMAS	
Address:	P.O. BOX 1892	
City-St-Zip:	HYANNIS, MA 02601	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JEFFREY L. MAROTTA PRES 08/28/2008
Electronic Signature of Signing Officer or Director — Date