

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000003293

FILED
May 02, 2009
Secretary of State

Entity Name: EARTH ETHICS, INC.

Current Principal Place of Business:

3393 TWO SISTERS WAY
PENSACOLA, FL 32505

New Principal Place of Business:

Current Mailing Address:

3393 TWO SISTERS WAY
PENSACOLA, FL 32505

New Mailing Address:

FEI Number: 61-1566475 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

Name and Address of New Registered Agent:

GUTIERREZ, MARY F
3393 TWO SISTERS WAY
PENSACOLA, FL 32505 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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BUCHANAN, GENA
Address: 5412 FLINTWOOD CIR.
City-St-Zip: PENSACOLA, FL 32504

Title: D () Delete
Name: ETHERIDGE, JANET
Address: 2215 JACKS BRANCH RD.
City-St-Zip: CANTONMENT, FL 32533

Title: D () Delete
Name: PENNINGTON, LAURA
Address: 3960 SUNNY MANOR CIR.
City-St-Zip: MILTON, FL 32583

Title: D (X) Delete
Name: ROWELL, TIFFANIE
Address: 9015 EL MATADOR LANE
City-St-Zip: PENSACOLA, FL 32506

Title: D () Delete
Name: SKILLMAN, PAULETTE
Address: 702 CREEKWOOD RD.
City-St-Zip: MARY ESTHER, FL 32549

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:

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: MARY GUTIERREZ

MS.

05/02/2009

Electronic Signature of Signing Officer or Director

Date