## 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N10000007314

FILED May 01, 2011 Secretary of State

Entity Name: EMPOWERMENT CENTER INTERNATIONAL, INC

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

592 ELLIS RD SOUTH 5913 NORMANDY BLVD SUITE 112 SUITE 6

JACKSONVILLE, FL 32254 JACKSONVILLE, FL 32205

Current Mailing Address: New Mailing Address:

P.O. BOX 40663

JACKSONVILLE, FL 32203

FEI Number: 50-0631636 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

SAILOR, ELDER ELISHA L
592 ELLIS RD SOUTH
5913 NORMANDY

SUITE 112 SUITE 6

JACKSONVILLE, FL 32254 US JACKSONVILLE, FL 32205 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: ELISHA L. SAILOR 05/01/2011

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: F

 Name:
 FRANKLIN, BERNARD R

 Address:
 P.O. BOX 40663

 City-St-Zip:
 JACKSONVILLE, FL 32203

Title: VP

Name: SAILOR, ELISHA L Address: P.O. BOX 40663

City-St-Zip: JACKSONVILLE, FL 32203

Title: D

Name: WIMBERLY, KIM V Address: P.O. BOX 40663

City-St-Zip: JACKSONVILLE, FL 32203

Title: D

 Name:
 KIRKLAND, ANTONIO

 Address:
 P.O. BOX 40663

 City-St-Zip:
 JACKSONVILLE, FL 32203

Title: SD

Name: HILLS, LYNFAHIA Address: P.O. BOX 40663

City-St-Zip: JACKSONVILLE, FL 32203

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: BERNARD R. FRANKLIN P 05/01/2011