2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000007314

Apr 30, 2012 Secretary of State

Entity Name: EMPOWERMENT CENTER INTERNATIONAL, INC

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

5913 NORMANDY BLVD SUITE 6 JACKSONVILLE, FL 32205

New Mailing Address: Current 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 SAILOR, ELDER ELISHA L 5913 NÓRMANDY 1759 DOT STREET JACKSONVILLE, FL 32209 SUITE 6 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 04/30/2012

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

FRANKLIN, BERNARD R Name: Address: P.O. BOX 40663 City-St-Zip: JACKSONVILLE, FL 32203

Title:

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

City-St-Zip: JACKSONVILLE, FL 32203

Title:

HUDSON, LAVORAH R Name: Address: P.O. BOX 40663 City-St-Zip: JACKSONVILLE, FL 32203

Title:

Name: KIRKLAND, ANTONIO P.O. BOX 40663 Address: City-St-Zip: JACKSONVILLE, FL 32203

Title:

HILLS, LYNFAHIA Name: P.O. BOX 40663 Address: JACKSONVILLE, FL 32203 City-St-Zip:

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 Ρ 04/30/2012