

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005148

FILED
Jan 12, 2006
Secretary of State

Entity Name: POTTER'S HOUSE INTERNATIONAL, INC.

Current Principal Place of Business:

POTTER'S HOUSE
5688 E SR 44
WILDWOOD, FL 34785k

New Principal Place of Business:

5688 E SR 44
WILDWOOD, FL 34785

Current Mailing Address:

5688 E SR 44
WILDWOOD, FL 34785

New Mailing Address:

FEI Number: 59-3593154

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLER, TROY L
4643 COUNTY RD 118
WILDWOOD, FL 34785 US

Name and Address of New Registered Agent:

MILLER, TROY L
5155 CR 114D
WILDWOOD, FL 34785 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: TROY L. MILLER

01/12/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MILLER, TROY L
Address: 4643 COUNTY RD 118
City-St-Zip: WILDWOOD, FL 34785

Title: VD () Delete
Name: MILLER, JOHN R
Address: 1608 MEADOW ST
City-St-Zip: WILDWOOD, FL 34785

Title: S () Delete
Name: MILLER, TIMOTHY C
Address: 4643 COUNTY RD 118
City-St-Zip: WILDWOOD, FL 34785

Title: TD () Delete
Name: MILLER, LEMUEL D
Address: 10312 COUNTY RD 209
City-St-Zip: OXFORD, FL 34484

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: MILLER, TROY L
Address: 5155 CR 114D
City-St-Zip: WILDWOOD, FL 34785

Title: VP (X) Change () Addition
Name: MILLER, JOHN R JR
Address: 1608 MEADOW ST
City-St-Zip: WILDWOOD, FL 34785

Title: SEC (X) Change () Addition
Name: MILLER, TIMOTHY C
Address: 5155 CR 114D
City-St-Zip: WILDWOOD, FL 34785

Title: TREA (X) Change () Addition
Name: MILLER, LEMUEL D
Address: 4663 CR 116
City-St-Zip: WILDWOOD, FL 34785

I hereby certify that the information supplied with this filing does not qualify for the 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: TROY L. MILLER

PRES

01/12/2006

Electronic Signature of Signing Officer or Director

Date