

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P99000072903

FILED
Mar 24, 2009
Secretary of State

Entity Name: EDUCARE NATURAL FOODS AND BREAD OF LIFE BAKE SHOP, INC.

Current Principal Place of Business:

6100 W. FAIRFIELD DR.
SUITE G
PENSACOLA, FL 32506

New Principal Place of Business:

Current Mailing Address:

6100 W. FAIRFIELD DR.
SUITE G
PENSACOLA, FL 32506

New Mailing Address:

FEI Number: 59-3607033

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, JULIE B
2012 N. 61ST AVE.
PENSACOLA, FL 325063462 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: P () Delete
Name: JONES, JULIE B
Address: 2012 N 61 AVE
City-St-Zip: PENSACOLA, FL 32506

Title: V () Delete
Name: JONES, D P
Address: 2012 N 61 AVE
City-St-Zip: PENSACOLA, FL 32506

Title: ST () Delete
Name: JONES, PATRICIA A
Address: 2012 N 61 AVE
City-St-Zip: PENSACOLA, FL 32506

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: JONES, JULIE B
Address: 2012 N 61ST AVE
City-St-Zip: PENSACOLA, FL 32506

Title: V (X) Change () Addition
Name: JONES, PATRICIA A
Address: 2012 N 61ST AVE
City-St-Zip: PENSACOLA, FL 32506

Title: T (X) Change () Addition
Name: JONES, MARY E
Address: 2012 N 61ST AVE
City-St-Zip: PENSACOLA, FL 32506

Title: S () Change (X) Addition
Name: JONES, SARAH N
Address: 2110 N 61ST AVE
City-St-Zip: PENSACOLA, FL 32506

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JULIE B. JONES

P

03/24/2009

Electronic Signature of Signing Officer or Director

Date