

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000007830

**Entity Name:** 121AUTHENT.ORG INC.

**Current Principal Place of Business:**

2220 COUNTY RD 210 WEST,  
PMB #342 SUITE 108  
JACKSONVILLE, FL 32259

**Current Mailing Address:**

2220 COUNTY RD 210 WEST  
PMB #342 SUITE 108  
JACKSONVILLE, FL 32259

**FEI Number:** 27-0801600

**Certificate of Status Desired:** No

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

NORTHWEST REGISTERED AGENT LLC  
3030 N. ROCKY POINT DRIVE, STE 150A  
TAMPA, FL 33607 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

**Officer/Director Detail :**

Title D  
Name MILLER, JOHN E  
Address 2220 COUNTY RD 210 WEST, S#108,  
PMB 342  
City-State-Zip: JACKSONVILLE FL 32259

Title D  
Name WOOD, THOMAS H  
Address 18407 SW 188TH ST  
City-State-Zip: ARCHER FL 32618

Title D  
Name WILEY, MICHAEL  
Address 18407 SW 188TH ST  
City-State-Zip: ARCHER FL 32618

*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:** JOHN EDWIN MILLER

**DIRECTOR**

**01/06/2015**

Electronic Signature of Signing Officer/Director Detail

Date