2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 08, 2019
Secretary of State
5400175207CC

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Entity Name: EVOLUTION INSTITUTE, INC.

Current Principal Place of Business:

10627 MACHRIHANISH CIRCLE
SAN ANTONIO, FL 33576

Current Mailing Address:

10627 MACHRIHANISH CIRCLE
SAN ANTONIO, FL 33576 US

FEI Number: 27-3353656

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

LIEBERMAN, JEROME PHD
10627 MACHRIHANISH CIRCLE
SAN ANTONIO, FL 33576 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	PR..
Name	WILSON, DAVID S PHD
Address	47 MORGAN RD.
City-State-Zip:	BINGHAMTON NY 13903

Title	ST.
Name	LIEBERMAN, JEROME PHD
Address	10627 MACHRIHANISH CIRCLE
City-State-Zip:	SAN ANTONIO FL 33576

Title	DIRECTOR
Name	MAYFIELD, ALPHONSO
Address	2112 S. CONGRESS AVE
City-State-Zip:	PALM SPRINGS FL 33406

Title	DIRECTOR
Name	WITOSZEK, NINA
Address	GYDAS VEI 16
City-State-Zip:	OSLO 0363

Title	DIRECTOR
Name	TURCHIN, PETER PHD
Address	209 TOWER HILL RD.
City-State-Zip:	CHAPLIN CT 06235

Title	DIRECTOR
Name	SEAMAN , JULIE
Address	6. W ANDREWS DRIVE
City-State-Zip:	ATLANTA GA 30305

Title	VP
Name	SHIMBERG, MICHELLE
Address	3214 W. FOUNTAIN BLVD.
City-State-Zip:	TAMPA FL 33609

Title	EXECUTIVE DIRECTOR
Name	MILLER, JERRY
Address	4601 BAY CREST DRIVE
City-State-Zip:	TAMPA FL 33615

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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: JERRY MILLER — EXECUTIVE DIRECTOR — 02/08/2019

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	REARDON, KENNETH
Address	46 HIGH STREET
City-State-Zip:	QUINCY MA 02169

Title	DIRECTOR
Name	DAVYDD, GREENWOOD
Address	10627 MACHRIHANISH CIRCLE
City-State-Zip:	SAN ANTONIO FL 33576

Title	DIRECTOR
Name	WISER, LORI
Address	10627 MACHRIHANISH CIRCLE
City-State-Zip:	SAN ANTONIO FL 33576