

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

DOCUMENT# N97000003609

**FILED  
Jan 12, 2015  
Secretary of State  
CC7426340505**

**Entity Name:** NOAH'S ARK OF CENTRAL FLORIDA, INC.

**Current Principal Place of Business:**

2225 E EDGEWOOD DR.  
SUITE 6  
LAKELAND, FL 33803-3634

**Current Mailing Address:**

PO BOX 92221  
LAKELAND, FL 33804-2221 US

**FEI Number: 59-3466684**

**Certificate of Status Desired: No**

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

KOSIK, JACK  
2225 E EDGEWOOD DR.  
SUITE 6  
LAKELAND, FL 33803-3634 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 PD  
Name GOSSSEN, PHILLIP  
Address 254 LOMA DR  
City-State-Zip: WINTER HAVEN FL 33881

Title TD  
Name HUNT, JOHN  
Address 4940 SOUTHFORK DR  
City-State-Zip: LAKELAND FL 33813

Title VD  
Name MCNUTT, MARGARET  
Address 5009 NORRISWOOD DR.  
City-State-Zip: MULBERRY FL 33860

Title VD  
Name RHODIG, JEFF  
Address 680 POWDER HORN ROW  
City-State-Zip: LAKELAND FL 33809

Title SECRETARY  
Name GILL, CHER  
Address 6241 CHRISTINA GROVE CIRCLE E  
City-State-Zip: LAKELAND FL 33813-3960

*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: PHILLIP GOSSSEN**

**PRESIDENT**

**01/12/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date