# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Jan 06, 2012**
**Secretary of State**

DOCUMENT# P09000091234

**Entity Name:** M-POWER PATH, INC.

**Current Principal Place of Business:**

716 SPRING HAVEN DR
SAINT JOHNS, FL 32259

**New Principal Place of Business:**

**Current Mailing Address:**

716 SPRING HAVEN DR
SAINT JOHNS, FL 32259

**New Mailing Address:**

**FEI Number: 27-1282887** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

CRAIG, MICHAEL R
716 SPRING HAVEN DR
SAINT JOHNS, FL 32259 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: PD
Name: CRAIG, MICHAEL R
Address: 716 SPRING HAVEN DR
City-St-Zip: SAINT JOHNS, FL 32259

Title: ST
Name: CRAIG, LAVON M
Address: 716 SPRING HAVEN DR
City-St-Zip: SAINT JOHNS, FL 32259

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

SIGNATURE: MICHAEL CRAIG PD 01/06/2012

Electronic Signature of Signing Officer or Director Date