

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12000010044

**FILED**  
**Mar 23, 2013**  
**Secretary of State**  
**CC3667689277**

**Entity Name:** PAS FOR TOMORROW, INCORPORATED

**Current Principal Place of Business:**

518 VENETIAN VILLA DRIVE  
NEW SMYRNA BEACH, FL 32168

**Current Mailing Address:**

518 VENETIAN VILLA DRIVE  
NEW SMYRNA BEACH, FL 32168

**FEI Number:** 46-1450446

**Certificate of Status Desired:** Yes

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

PIOTROWSKI, JAMES R  
518 VENETIAN VILLA DRIVE  
NEW SMYRNA BEACH, FL 32168 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 P  
Name PIOTROWSKI, JAMES R  
Address 518 VENETIAN VILLA DRIVE  
City-State-Zip: NEW SMYRNA BEACH FL 32168

Title VP  
Name MITTMAN, DAVID  
Address 87 NORTH HILLSIDE AVE  
City-State-Zip: LIVINGSTON NJ 07039

Title T  
Name BLUMM, ROBERT  
Address 69 ROBBINS AVE  
City-State-Zip: AMITYVILLE NY 11704

Title S  
Name FIELDS, KAREN  
Address 4 N 554 KLIEN RD  
City-State-Zip: WEST CHICAGO IL 60185

*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:** JAMES R PIOTROWSKI, PA-C, MS

**PRESIDENT**

**03/23/2013**

Electronic Signature of Signing Officer/Director Detail

Date