

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32294

Entity Name: ANOTHER WAY, INC.

Current Principal Place of Business:

CONFIDENTIAL LOCATION
164 NW MADISON STREET SUITE 103
LAKE CITY, FL 32055

Current Mailing Address:

P.O. BOX 1028
LAKE CITY, FL 32056 US

FEI Number: 59-3061078

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

FAGAN, DONNA L
468 SE EVERGREEN DRIVE
LAKE CITY, FL 32025 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: DONNA L. FAGAN

01/28/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT, DIRECTOR
Name GILL, BECKY DR
Address 760 PO BOX
City-State-Zip: BRONSON FL 32621

Title SECRETARY, TREASURER,
DIRECTOR
Name SENEAL, EILEEN
Address 911 SOUTH MAIN STREET
City-State-Zip: TRENTON FL 32693

Title DIRECTOR
Name NATHAN, ALBANO
Address P.O. BOX 1028
City-State-Zip: LAKE CITY FL 32056

Title DIRECTOR
Name TREMBLAY, RAY
Address P.O. BOX 1028
City-State-Zip: LAKE CITY FL 32056

Title EXECUTIVE DIRECTOR
Name FAGAN, DONNA L
Address 164 NW MADISON STREET
SUITE 103
City-State-Zip: LAKE CITY FL 32055

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: DONNA L FAGAN

EXECUTIVE DIRECTOR

01/28/2015

Electronic Signature of Signing Officer/Director Detail

Date