

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000111956

**Entity Name:** C3 PATHWAYS, INC.**Current Principal Place of Business:**531 S. ECON CIRCLE  
SUITE 1001  
OVIEDO, FL 32765**Current Mailing Address:**531 S. ECON CIRCLE  
SUITE 1001  
OVIEDO, FL 32765 US**FEI Number:** 20-1467806**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GODFREY, WILLIAM M  
531 S. ECON CIRCLE  
SUITE 1001  
OVIEDO, FL 32765 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      PRESIDENT, DIRECTOR

Name      GODFREY, WILLIAM M

Address    531 S ECON CIR  
STE 1001

City-State-Zip: OVIEDO FL 32765

Title      DIRECTOR

Name      OTTERBACHER, RONALD H.

Address    531 S ECON CIR  
SUITE1001

City-State-Zip: OVIEDO FL 32765

Title      DIRECTOR, VP

Name      WILLIAMS, STEVEN T

Address    531 S ECON CIR  
STE 1001

City-State-Zip: OVIEDO FL 32765

Title      DIRECTOR

Name      GODFREY, DIANE L

Address    531 S ECON CIR  
SUITE 1001

City-State-Zip: OVIEDO FL 32765

*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:** STEVEN T WILLIAMS

DIRECTOR/VP

01/12/2021

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