

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 718388

FILED
Jan 04, 2008
Secretary of State

Entity Name: LIFEPATH SOLUTIONS, INC.

Current Principal Place of Business:

199 AVE B NW
SUITE 300
WINTER HAVEN, FL 33881 US

New Principal Place of Business:

Current Mailing Address:

199 AVE B NW
SUITE 300
WINTER HAVEN, FL 33881 US

New Mailing Address:

FEI Number: 59-0766971 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DRAKE HOWARD
199 AVE B NW
SUITE 300
WINTER HAVEN, FL 33881 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: CHR () Delete
Name: BARBARA, CARPENTER
Address: 1339 ROBERT KING HIGH DRIVE
City-St-Zip: LAKE LAND, FL 33805 US

Title: VCHR () Delete
Name: PHILLIPS, KAREN
Address: 336 RUBY LAKE LOOP
City-St-Zip: WINTER HAVEN, FL 33884

Title: SEC () Delete
Name: KENNEDY-HULL, BRIDGET
Address: 28 BREVARD DRIVE SE
City-St-Zip: WINTER HAVEN, FL 33884

Title: TRSR () Delete
Name: BHATTACHARJEE, P.K.
Address: 1328 SUMMIT CHASE DRIVE
City-St-Zip: LAKE LAND, FL 33813

Title: PRES () Delete
Name: DRAKE, HOWARD
Address: 199 AVE B NW, SUITE 300
City-St-Zip: WINTER HAVEN, FL 33881

Title: ATT () Delete
Name: DARBY, BEN H JR
Address: 500 SOUTH FLORIDA SUITE 300
City-St-Zip: LAKE LAND, FL 33806 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CHR (X) Change () Addition
Name: CARPENTER, BARBARA
Address: 1339 ROBERT KING HIGH DRIVE
City-St-Zip: LAKE LAND, FL 33805 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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Name:
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City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: BARBARA CARPENTER

CHR

01/04/2008

Electronic Signature of Signing Officer or Director

Date