

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 740159

FILED  
Jan 04, 2010  
Secretary of State

**Entity Name:** PEACEFUL PATHS, INC.

**Current Principal Place of Business:**

2100 NW 53RD AVENUE  
GAINESVILLE, FL 32653

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 5099  
GAINESVILLE, FL 326025099 US

**New Mailing Address:**

**FEI Number:** 59-1809014

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HARRISON, THERESA B DR.  
2100 N.W. 53RD AVE  
GAINESVILLE, FL 32653 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: P  
Name: SCARBOROUGH, BRIAN  
Address: 2811 NW 41ST STREET  
City-St-Zip: GAINESVILLE, FL 32606

Title: VP  
Name: WILKES, JOANN  
Address: 4316 NW 41ST LANE  
City-St-Zip: GAINESVILLE, FL 32606

Title: PP  
Name: FERRER, JAMES JR  
Address: 1841 NW 14TH AVENUE  
City-St-Zip: GAINESVILLE, FL 32605

Title: S  
Name: HARMAN, BRYAN  
Address: 3676 NW 23RD DR. #308  
City-St-Zip: GAINESVILLE, FL 32605

Title: T  
Name: FUSSELL, PAULA V  
Address: 204 TIGERT HALL  
City-St-Zip: GAINESVILLE, FL 32611

Title: ED  
Name: HARRISON, THERESA B DR.  
Address: 2100 NW 53RD AVE  
City-St-Zip: GAINESVILLE, FL 32653

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: THERESA B. HARRISON

ED

01/04/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date